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Communications.

BIOGRAPHICAL SKETCHES

OF

Distinguished Living New York Surgeons.

By SAM'L. W. FRANCIS, M. D.,

Fellow of the New York Academy of Medicine.

No. 5.

James R. Wood.

JAMES RUSHMORE WOOD was born in the city of New York, in Frankfort street, September 14th, 1816. His father was a merchant of this city, and continued his commercial pursuits during his son's juvenile course. JAMES WOOD received instruction from that excellent and popular institution designated Friends' Seminary. For many years young WOOD was brought up a Quaker.

It may prove rather interesting to sectarian philosophers to know that most of our leading and prominently successful surgeons have been of that mild order of faith; such, for instance, as Drs. VALENTINE MOTT, CHEESEMAN, WOOD, PANCOAST, &c.

Soon after receiving the elements of general education, JAMES WOOD attended his first course of medical lectures at the College of Physicians and Surgeons, New York; studied under Dr. TULLEY, of New Haven, and Dr. DAVID L. ROGERS, of New York; subsequently entered Castleton (Vt.) Medical College; was there graduated M. D. in 1846, and appointed Demonstrator of Anatomy, by Dr. ALDEN MARCH, now of Albany.

In the year 1837, Dr. WOOD became associated with Dr. WILSON (he having been recently appointed Resident Physician during an epidemic of typhus fever,) in connection with Bellevue Hospital and all its inmates of a varied character. At this time that institution was the receptacle for lunatics, paupers, criminals, and all the diseased of a depraved and vitiated life.

For certain reasons best known to themselves, the assistant physicians, about this period, saw fit to cease visiting the sick. Dr. WOOD knowing the deplorable condition of the afflicted sufferers, immediately volunteered his services, and, in conjunction with Dr. WILSON, did all in his power to avert disease and relieve the dying. The hygienic laws and miserable ventilation were of so bad a character that many fell under the baneful effects of foul air. Food was also administered in a political way. No nurse, with few exceptions, could be relied upon for integrity of conduct, it being an invariable practice for those in attendance, like Sarah Gamp of old, to drink off the brandy ordered for the typhoid patient and let them go out with the tide.

Imagine a lunatic asylum, almshouse, hospital, house of correction, small-pox patients and every species of vagrant huddled together under one head; beneath political sway and subservient to the dictates of some venal scoundrel. Picture to oneself wards in the depth of winter crammed with dead and dying, with a red-hot stove in the centre of the room radiating heat enough, in its vicinity, to produce delirium; while those poor wretches, whose fronts were almost scorched by undue warmth, were nearly frozen and completely chilled on the other side by the searching drafts through broken panes and half-open shutters.

I have been informed by physicians, that it cannot enter into the mind of even an imaginative man to appreciate fully the demoralizing neglect practiced at this place during its gradual uprising from the slough of despond.

Covering an area many times larger than that now designated Bellevue Hospital, the property extended from Twenty-eighth street and the East river to Twenty-third street and East river, running up to the Second avenue and offering inducements, by the beauty of its locality, to found institutions, colleges, and asylums of a prominent character. But those in authority at that time did not see fit to act openly. The city property was put up for sale, rapidly bought in for less than one-fifth its prospective value, and thus, forever removed from the power of

benefit, was cramped in usefulness and crippled as to the city.

That which was the hospital proper during those dark days, is now a factory for soldiers' blankets and the making of stockings for the million.

In 1847, Dr. WOOD with Dr. DRAKE, a naturalist of immense ability and profound attainments, assisted by the President of the Board of Aldermen, MORRIS FRANKLIN, labored so effectually towards a chronic cure of the abuses that had run rampant, that by a statistical comparison as to patients and deaths, it was soon ascertained that more than six hundred lives were saved annually. This was accomplished by rendering the governmental system less political and more scientific. During Dr. WILSON's era Dr. WOOD made nearly all the post mortem examinations that were necessary for the establishment of facts. They numbered many hundreds. What is very remarkable and worthy of note is the interesting circumstance that not once during all the Doctor's sojourn and practical experience in Bellevue Hospital, did he contract a disease or lose a day from his immediate contact with the patients, and this during the epidemics of cholera and typhus.

Soon after the new system began to work favorably Dr. WOOD originated a Saturday Surgical Clinic for the practical benefit of students, and has faithfully continued it through sixteen years. This succeeded so well that in a short time many other attending physicians and surgeons held clinical or bedside lectures, and opened thereby a new vista to the aspiring young. As an additional inducement to the anatomical devotee, Dr. WOOD founded the Wood Prize for the best specimen of dissection and anatomical preparation for the session. This spurred on many to emulate excelsior, and truly wonderful and exquisite are some of the specimens now placed in Dr. WOOD's pathological museum.

Through the courtesy of Dr. WOOD I recently visited, in his company, his anatomical and pathological museum and passed a most profitable and interesting hour. Here may be seen one of the finest specimens of deformed pelvis in this country; a prepared stomach larger than any one that could be produced before the days of lager beer, and that from a doctor. Specimens of the second growth of bone after an operation for necrosis, &c., which prove effectually what Dr. WOOD, in company with others, has striven to establish, namely, that by separating the periosteum from the necrosed bone

and carefully enucleating it a new bone will grow and supply the deficiency in a most satisfactory manner. Dr. WOOD first showed me an entire jaw removed by him for phosphor-necrosis and afterward a second jaw attached to the skull of a patient who had been operated upon and who subsequently died of another disease. It was his good fortune to secure the prize. Really the adaptability of the second jaw; the manner of its attachment, and yet its difference from a natural jaw strike the beholder with admiration, and convince the most skeptical.

When we consider that where formerly amputation was called for, on account of a dead inch, now by the exsection of a small portion of destroyed bone an entire limb may be saved, we necessarily feel grateful to one who, by his practical exertions, has established the fact beyond dispute.

Not long since Dr. WOOD delivered an address before the New York Academy of Medicine on "The Growth of Bone," and by his morbid specimens and history of operations and their results he placed the matter before the mind in a clearer and more forcible light than has yet been done. He is now preparing a work on the subject with elaborate copper plates.

As an operator Dr. WOOD is bold, free, confident, and anatomical. Cutting well either with his left or right hand, he performs the most serious operations with becoming skill, and with the happiest results. It has not been so much his desire to originate new practices as to improve on old ones, and by a careful ratiocination arrive at important issues.

In 1861 Dr. WOOD became associated with many of the leading physicians and surgeons in this city, and together with them and under the auspices of the Almshouse Commissioners founded "Bellevue Hospital College," an institution that bids fair to surpass any other one now formed in this country. The great facility it offers to the student of disease, by its immediate vicinity to the large hospital, is already realized by the young in medicine; for although not yet in its fourth session, its matriculated students number over three hundred, and steps are being taken to erect a new building with larger capacity and greater conveniences. The foundation is already laid.

Few can fail to see the advantage of having an opportunity to study diseases at the bedside of patients as soon as the lecture on any particular case is over. This not being obliged to wander all over the city to find the victim of certain affections, but only to walk from one building into

another, will eventually force itself on all and draw from other colleges.

Professor WOOD married in 1853, the daughter of JAMES ROWE, a retired merchant, and has continued to practice in this metropolis ever since his graduation. As a lecturer he confines himself not merely to his subject but a particular case of disease or its operation. By his wide experience in surgical philosophy he is enabled to draw on memory and furnish anecdotes sufficiently instructive to fix a fact upon the mind. In 1861 he was called to the Chair of Professor of Operative Surgery and Surgical Pathology.

Dr. WOOD has reproduced almost every bone in the body by treating with profound respect the periosteum. His museum contains all the experiments on the human patient that were practiced on birds and quadrupeds by DUHAMEL and FLOURENS; and it is in the same ratio that we can look up to him as an operator and applaud his success.

It was ever Professor WOOD's desire to found a college for medical students at Bellevue Hospital. He foresaw the necessity for such a step and proclaimed its ultimate results. Pleasing indeed must it be for him to survey the present and compare it with the past. The first indication of this wish may be seen in the pathological museum which owed much of its early foundation to his energetic influence. He next planned the operating amphitheatre, which has few equals in the same line. During the twenty-seven years that Dr. WOOD has been connected with Bellevue Hospital his labors in behalf of this institution have not passed unnoticed by those in power, and the wellwishers of the community. In an address on the inauguration of the Pathological Building, the following remarks were made by one fully capable of appreciating Dr. WOOD's efforts:

"I am thrice happy to add that for the special assistance which has so happily brought to such an issue this worthy design, there is not one of you who will not speak in accents of gratitude and regard the name of our liberal and enlightened co-operator, Surg. JAMES R. WOOD."*

Prof. STEVENS, of the College of Physicians and Surgeons, and Prof. WILLARD PARKER, both testified on that occasion to the exertions and active efficiency of Dr. WOOD in establishing the Pathological Museum, &c.

From 1837 to 1847 Dr. WOOD performed the majority of the operations in Bellevue. This was

no easy task; for at times a series of complications rendered more difficult what might at first present only an obstacle in the way. This was at the request of the resident physicians. During this time Dr. WOOD tied both carotids in the same patient for malignant disease of the antrum. He also placed a ligature on the subclavian on three different occasions, and tied the external iliac three several times.

Several hundred post mortems have been made by Professor WOOD during his eventful life. Hence one can fully appreciate his saying that no man has proved himself a qualified student till he can cut down and tie arteries without the aid of eyes.

In 1857 Dr. WOOD was appointed Chairman of the Committee on Medical Education of the National Medical Association. On that occasion he made some excellent remarks and proposed certain improvements which, though they met with much opposition from several members at first, are now being realized with all their force and reasonability. Dr. WOOD was also mainly instrumental, in company with Drs. PAINE, VACHE, and PARKER, in superintending the passage of the "Dissecting Bill." This took three or four years to push it through. It passed the House one time, but was killed in the Senate, and finally, with other bills, was passed by one majority.

The substance of the bill was, that "All vagrants dying, unclaimed and known by public authorities to be such, and without friends, are to be given to the institutions in which medicine and surgery are taught for dissection: the debris to be buried in the public cemetery." The saving clause that rescued the bill from oblivion, was as follows: "Any unknown person found dead shall be buried."

All colleges are now furnished with cadavera without charge, and the demand does not exceed the supply. For this advantage and freedom from annoyance in the dissection of subjects, the profession is chiefly indebted to Professor WOOD, Drs. VACHE, PARKER, and PAINE.

Dr. WOOD was twice elected President of the New York Pathological Society, and formerly was surgeon to St. Vincent Hospital and New York Ophthalmic Dispensary; honorary member of New York and Massachusetts State Medical Societies; and consulting surgeon of the Colored Orphan Asylum; also corresponding member of the Historical Society of Yale College, &c. For many years he held the dignified position of Chairman of the Surgical Section of the New York Academy of Medicine. During those

* JOHN W. FRANCIS, President Medical Board, Bellevue Hospital.

genial evenings old and young, obscure and famed mingled there in pleasant converse. Harmony pervaded the apartments; envy yielded to the blandishments of successful hospitality; and refreshments soothed the wearied frame, while interesting data occupied the mind.

Dr. Wood has published pamphlets on "Removal of the entire Lower Jaw;" "Ligature of External Iliac Artery;" "Spontaneous Dislocation of the Head of the Femur into the Ischiatic Notch occurring in Morbus Coxarius;" and various other important statements of vital interest to the operating practitioner. He is now engaged in preparing an elaborate work on conservative surgery which embodies experience and common sense, and is made acceptable by the clearness of the style. Professor Wood's "Early History of the operation of Ligature of the Primitive Carotid Artery, &c.," is replete with instructive facts, and is an historical compendium abounding in data rarely to be met with in so pleasing a shape.

Dr. Wood began life without a cent; was obliged to hire money to complete his medical education, and now, while reaping his reward as a successful surgeon, pleasing indeed must be the reflection that he has not only travelled over a rough path, but built the road himself.

AMPUTATION OF BOTH THIGHS FOR RAILROAD INJURIES.

By JOHN G. KOHLER, M.D.,

Of Schuylkill Haven, Pa.

Case. On the 19th of September, 1864, a lad aged 9 years, the son of a poor laborer on the Philadelphia and Reading Railroad, had the misfortune to be thrown under the wheels, some five or six laden cars passing over his legs, severing his right leg at the knee-joint entirely from its connections with the thigh, and his left leg above the knee-joint only connected by the common integument.

When I arrived I found him lying on the floor weltering in blood, with feeble pulse, and countenance pale and anxious. After examining his limbs, the state of his pulse, etc., I stated to his parents, that the only chance for his life was immediate amputation, as well as that he might possibly expire before removed from the table. They gave their consent to the proposition upon which I had him placed upon the table and administered a mixture of ether and chloroform.

When fully under its influence I amputated both thighs in rapid succession at lower third by the circular incision.

He passed a tolerably comfortable night and reaction was fully established by the following morning. His recovery was rapid, the flaps uniting in greater part by adhesive inflammation. His health is excellent, being able to move about the room on his buttocks.

When I first saw this case I looked upon it as hopeless, though something must be done to alleviate his condition, and the only possible remedy was *amputation*. Had I waited until reaction was established I am confident I should have lost my patient.

I have, on repeated occasions, operated before reaction was established, and find my rule holds good in the majority of cases, having lost but few patients by amputation.

In the case of young HARNER, from whom in 1847, I removed both legs below the knees, and his left arm near the shoulder-joint before reaction took place, I fully established the fact that the primary amputation was the safest road to success.

In regard to the case of HARNER I would refer to Professor S. D. GROSS' admirable "System of Surgery."

NOTES ON EXSECTIONS.

By EDWARD BATWELL, M. D.,

Surgeon Fourteenth Michigan Vet. Vol. Infantry, in charge of Hospital Second Division Fourteenth Army Corps.

For many years the relative merit of excision, when compared with amputation, has been a subject on which the minds of all reflecting and operating surgeons have dwelt with considerable anxiety and interest, involving, as it does, not alone the triumph of conservative surgery and the "eclat" redounding to the successful operator; but also the future well-being of our patient, not only as regards his general health, and recovery with an unimpaired constitution, but with respect to the ultimate usefulness of the limb.

The period when this subject was first presented to the world as a new theory for consideration and practice, is involved in so much doubt, that it is useless to endeavor to trace it to its primitive source. Suffice for our present business to know that it stands forth as a powerful rival to amputation, and that correct statistics are required to settle the matter as to their relative superiority, particularly in the upper extremity, for it is almost impossible to conceive a case (where the main arteries and nerves are intact, and where the proper facilities for treating our patients are afforded,) in which

resection does not offer a better chance of ultimate recovery than amputation. And even supposing it does not present so favorable an aspect, yet the ultimate results are so far ahead and the usefulness of the limb, (no matter how mutilated,) so superior to any artificial compensation, that we consider the greater risk fully equalized by the results gained.

The reports of the following cases are selected from many of a similar character occurring in the hospital under my charge, and present several points of interest both as to the nature of the injury and the course of treatment pursued. The first case mentioned occurred on the 27th of June, 1864, before Kenesaw Mountain.

Exsections of the Arm.

CASE 1. Private M., Co. G, Tenth Illinois Vet. Vol. Infantry, received a gunshot wound, penetrating through the deltoid muscle, comminuting the head of the humerus, and the ball lodging in the neck of the scapula through the glenoid cavity. An incision through the deltoid parallel to its fibres and commencing at the acromion process, was carried about six inches down the shaft, fully exposing the head of the humerus and capsular ligament, which was opened and disengaged from its attachments. The bone was then turned out by bringing the arm across the chest, carefully dissected downward as far as the fracture extended, and was very soon removed with the chain saw. About three inches were taken away. The ball was extracted through the glenoid cavity, from which all loose spiculae of bone were carefully removed. Cold water dressing was applied, and in three days the patient was sent to the rear and made a rapid recovery, having a good and useful hand.

The above operation performed by Surgeon COOPER, U. S. A., Medical Director of the Department of the Cumberland, presents two points differing from exsections of the shoulder-joint as generally performed. First, the straight incision as advocated by WHITE, and again the disarticulation of the bone previous to its removal by the saw. The incision here used has the following advantages: Not exposing so large a surface, less risk of injuring the main artery and nerves, preserving collateral circulation by not dividing the muscular tissue across its fibre, preserving intact the contractility of the deltoid muscle, besides not requiring the ligation of any arteries. The advantages sought for the disarticulation of the bone previous to

its separation from the shaft, are the lessening of the risk of injury to the brachial artery, and the greater facility presented for the removal of just the required portion of bone, without isolating or dissecting any sound osseous structure from its surrounding attachments.

CASE 2. J. H., Co. E, Seventeenth N. Y. V. Infantry, received a gunshot wound on the 1st of September, perforating the joint and comminuting the head of the humerus. The operation was performed as above, and the head and two and a half inches of the bone removed. I determined to try the effects of bringing the ends of the bone in contact with the glenoid cavity, and applied bandages to carry out this object, but subsequent dressings permitted the arm to get elongated to its original length. After four weeks time, however, the process of bandaging and strapping was again had recourse to, and with decided success, as in six weeks he had a perfectly useful hand, the arm about three inches short, but capable of a large amount of motion. The fingers and forearm were perfect in all their functions.

CASE 3. C. W. Seventy-eighth Illinois Vol. Infantry was shot through the shoulder-joint September 1st, completely destroying the head of the humerus and the glenoid cavity. The operation was performed as in the preceding cases, and with similar successful results. He has a good, useful arm, and is capable of contributing to his own support.

CASE 4. J. G., Co. D. Seventy-eighth Illinois Vol. Infantry, shot through the neck of the humerus, comminuting both the head and four inches of the shaft. The bone was removed at its lower end and dressed as in other cases, and though the patient was a delicate exsanguinated young man, with an evident strumous diathesis, yet his recovery was rapid and as in the preceding cases left him with a good and useful hand.

The few cases which have been reported above, have not been selected from the very many that occurred during the campaign on account of their fitness to illustrate any particular sort of treatment, but it was allowed us to follow these to the end, and to treat and dress them as we deemed fit, whereas the larger proportion were removed to the rear in a very short time after being operated on.

Hospital Reports.

PHILADELPHIA HOSPITAL, }
October, 1864.

SURGICAL CLINIC OF DR. D. HAYES AGNEW.

Reported by W. H. Ford, M. D., Resident Physician.

Fibrous Tumor of the Labium.

Tumors about the external genital organs are of different kinds. The fibrous, cystic, and hypertrophic, are the most common. Fibrous tumors occupy the external labia, while the cystic are situated upon the mucous membrane. There is also an hypertrophy of the labia, which is mostly of syphilitic origin. The tumor in the present case, which is about the size of a small orange and situated upon the left external labium, is fibrous. The diagnosis is not difficult. The tumor is dense, firm, and movable, and, in shape somewhat globular. It is painless, slow in growth, and is inconvenient only by its bulk. The only remedy is extirpation. The tumor will not return.

The patient will be rendered insensible to pain by a mixture of chloroform and sulphuric ether, in the proportion of one part of chloroform to three parts of ether by weight. This preparation combines the good qualities of both drugs, while it avoids their objectionable features. Anæsthesia is speedily produced without the nauseating effect of pure ether, and the alleged dangerous depression of undiluted chloroform.

A curved incision about two and a half inches in length was made on each side of the tumor, forming an ellipse about one and a half inches in diameter. At the base of the tumor is a bed of fat; to this the incisions were made, and the tumor, including a portion of the skin, was dissected out. Two ligatures were applied, and brought out of the wound at its most dependent part. The parts are sponged with warm water to invite bleeding which will soon cease, unless some vessel has been cut which should be ligated. The practice of sponging fresh wounds with cold water is becoming too common. It is a mistaken practice, which often causes subsequent unnecessary suffering, if not positive injury. Vessels which require the ligature, temporarily cease bleeding on account of the application of cold water, and thereby elude the notice of the operator. The wound is dressed, and secondary hemorrhage ensues, which necessitates the removal of the sutures and the opening of the wound, that search may be made for the bleeding vessel to the detriment of the patient, and the annoyance of the surgeon. The wound was closed with interrupted lead-wire sutures. Lint and compresses confined by adhesive strips constitute the entire dressing.

Chronic Bursitis.

E. C., æt. 26 years, a native of Ireland, has a tumor on her left elbow, which has existed for a year, and which she attributes to a fall. This tumor is dependent upon an accumulation of the natural fluid in the subcutaneous bursa situated at this point the result of chronic inflammation. The natural contents of a bursa, though not precisely the same as the synovial fluid of the joints, are very analogous to it. These bursæ, numbering about one hundred and fifty, are distributed all over the body, and their function is to facilitate motion, and ward off pressure.

They are liable to acute and chronic inflammation, but most commonly the latter. The ordinary result of chronic inflammation of a bursa is an accumulation of the natural secretion in its sac. This is most generally produced by habitual pressure, and is illustrated by the so-called "housemaid's knee," and the "collier's elbow," which latter this case somewhat resembles.

The true character of these swellings is easily discerned. There is no preternatural heat, no pain, no discoloration of the parts. The tumor is soft and elastic. These symptoms with the history of the case, the position of the tumor, and the use of the exploring needle, enable us to form a correct diagnosis.

There are various means recommended for the cure of this affection, among which, are tincture of iodine, mercurial plaster, blisters, pressure; but none are so reliable and effective as the seton. Its use will be illustrated in the present case. The fluid is evacuated by a delicate bistoury by a valvular incision, and then three strands of silk are passed through the sac and tied loosely, and the parts are enveloped in a flaxseed poultice. The object of the seton is to arouse sufficient inflammation to obliterate the cavity. One strand of silk is removed daily (beginning the second or third day after the operation) the poultice being continued. After several days the poultice may be discontinued, and pressure maintained by a compress and roller. But a few weeks will suffice to complete a cure.

Paronychia.

Paronychia, or whitlow, as it is commonly called, is an inflammation of the thumb or finger which has a tendency to suppuration. There are two kinds of paronychia: the superficial and the deep-seated. The superficial is confined to the skin and subcutaneous cellular tissue; but the deep-seated affects all these tissues, and in addition the thecæ of the tendons, the tendons themselves, the periosteum and bone. The inflammation of the deep-seated variety is usually of a severe character, speedily advancing to suppuration of the parts, and necrosis of the phalanx, if not interfered with. The matter travels along the thecæ and muscles to the palm

of the hand, and even to the forearm, and abscesses follow, producing destructive results. Necrosis of one or more phalanges is not an uncommon sequence.

The two following cases illustrate the early and latter stages of this affection, and their treatment: I. R., Ireland, æt. 30 years, has been suffering for a few days with a whitlow on the second finger of the right hand. The cause is unknown to him. The finger is tumefied and discolored. The swelling is tense and resisting. The pain, which is sometimes felt in the wrist and forearm, is throbbing, and so severe as to disturb his sleep. Poultices have been applied but with little relief. The only satisfactory and effective plan of treatment is the knife. We make an early and free incision—the edge of the knife touching the bone. By this means the pent up fluids escape, and the tension and pain are relieved. An emollient poultice is the only dressing.

The following case illustrates the serious consequences of neglected paronychia: S. McC., æt. 48 years, has had a whitlow on the distal phalanx of the left thumb for three weeks. For more than a week she neglected the swelling, though suffering extreme pain, thinking it would get better. When admitted to the hospital an incision was promptly made over the swelling with the hope of saving the thumb, but too late to prevent necrosis, which the probe now detects. The first phalanx is entirely necrosed, and of course must be removed. It will not be proper, if it can be avoided to remove the thumb at the first joint, as it is a most important member. The bone must be removed and the soft parts left intact, so that the usefulness of the organ will not be much impaired. A deep incision is made in the median line of its palmar surface and the bone carefully excised. The whole thumb is then enveloped in an emollient poultice. The wound will heal by the granulating process.

JEFFERSON MEDICAL COLLEGE, }
October, 1864. }

SURGICAL CLINIC OF PROF. S. D. GROSS, M.D.

Reported by John P. Shrawder.

Onystitis.

J. M., 5 years of age has an affection of the middle finger of the right hand, which commenced one year ago after a slight injury to the parts. The finger is hypertrophied, elongated, indurated and livid in appearance. The nail is entirely black, and extending around its root there is a narrow ulcer, discharging a thin ichorous fluid. This disease is very painful, occurs early in life, and although not a malignant disease is usually described under the name of onychia maligna. It is simply an inflammation extending around the root of the nail, termi-

nating in ulceration and ultimately assuming a phagedenic character. The precise nature of the disease has not yet been determined, but it is usually supposed to be scrofulous. Professor Gross is of opinion that it is generally syphilitic in its origin, the elements of the disease existing in a latent condition, and being aroused by some cause manifests itself at this particular point.

The treatment of the disease must in a great measure be constitutional. The following was ordered to be given three times in the twenty-four hours, with a gentle purge occasionally.

R. Hyd. chlor. mit. gr. $\frac{1}{2}$
Opium gr. $\frac{1}{2}$
Ferri iodidi gr. $\frac{1}{2}$ M.

The nail was removed, and the following ointment consisting of

R. Ung. hyd. nit. 3j.
Ung. adipis 3iij.
Pulv. opii gr. x. M.

was ordered to be applied to the parts, along with daily ablutions with tepid water containing a small quantity of Labarague's solution.

Constitutional Syphilis.

J. F., 2 years of age, is laboring under syphilis inherited from his father. His body and extremities are covered with an abundance of small rounded bronze-colored scaly eruptions which first showed themselves about three months ago. Around the verge of the anus and at a little distance from it are condylomatous excrescences of four weeks duration. The mother of the child, who seems to be free from the disease, is the wife of a soldier. She had a miscarriage about five months ago, which was probably owing to the same disease. The treatment must be constitutional. A combination of

R. Potass. iodidi gr. x.
Hyd. chor. corrosiv. gr. $\frac{1}{2}$.
Aqua f 3iijss. M.

was ordered to be given in doses of a teaspoonful every eight hours. The child is to be well washed with tepid salt water, wiped dry, and dusted with starch. The contiguous surfaces of the excrescences are to be separated by means of patent lint sprinkled with dry calomel, and confined by means of a T bandage.

Medical Societies.

Vermont Medical Society.

Reported by our Correspondent.

The Annual Session of the Vermont Medical Society was held at Montpelier, October 19th and 20th. Dr. P. D. BRADFORD of Northfield, President of the Society, occupied the chair. About one-fourth of the regular physicians in the State were present.

Listening to the records of the semi-annual meeting and the usual routine work of calling committees and filling vacancies, receiving applications for membership, introducing delegates, etc., occupied the forenoon of the first day.

In the afternoon Drs. A. T. WOODWARD of Brandon, and L. C. BUTLER of Essex, two members of the committee appointed at the semi-annual meeting to investigate the subject of *Cerebro Spinal Meningitis* or *Spotted Fever*, each reported the result of their examinations.

Dr. WOODWARD communicated his personal experience, his observations at the bedside, his treatment, post-mortem examinations and appearances, and finally his conclusions. These are valuable opinions, as they come from one who is eminently fitted for the work,—a scholar, a close observer, and above all a man who dares to do his own thinking and speak his own convictions.

Dr. BUTLER gave the history of the disease from its origin in this country; when, where, and to what extent it has prevailed; the opinions of the most reliable authorities during the whole time; its symptoms, treatment, and morbid anatomy; in short every thing that an earnest and indefatigable worker could collect on the subject.

Dr. O. F. FASSET of East Berkshire, also presented a very valuable paper on this subject. He gave a tabular statement and summary of all the cases which have come under his care—some thirty in number. This is the most extensive report of its kind which has come before the profession since the recent appearance of this disease.

These papers were severally referred to the Committee on Publication, to be printed in the forthcoming volume of the Society's Transactions.

Coming, as these reports do, before the profession just at a time when in the judgment of eminent physicians we have reason to apprehend that this terrible malady will become more prevalent during the approaching winter, they deserve more than a passing notice. They were made by men who have had the bitter experience of treating the disease, and hence the thoroughness of the reports, their elaborate and profound character, eminently practical scope and summary, and the earnest efforts to bring to light the hidden mysteries of this comparatively new and deadly disease—a disease which has already brought terror to our own State and death to many of its inhabitants.

The annual address of President BRADFORD was a finished production, sound in material, eloquent in delivery, interesting and profitable to all who heard it. His subject was *Tuberculosis*. As the President's address is soon to appear in the published transactions of the Society we attempt no synopsis of it, but bespeak for it the attentive perusal of the profession.

Dr. E. A. POND of Rutland, read a finely prepared article on the subject of Diphtheria, and presented portraits and paintings to illustrate his cases and his statements.

SECOND DAY.

The Committee on the Place of the semi-annual meeting reported Stowe, with a view, we suppose, of combining pleasure and profit; that place being the head-quarters of travel to the summit of the Green Mountains, and the Society voted unanimously to hold its next semi-annual meeting at that place, on the 28th and 29th days of June prox.

The Committee on Revision of the Fee-bill next made their report; which, after a prolonged discussion, eliciting some diversity of opinion in regard to its details and its practicability, was laid on the table.

Dr. E. A. KNIGHT, delegate to Burlington Medical College, presented a report complimenting the Faculty and students, and endorsing the course of study required in that school.

On motion of Dr. C. P. FROST, the Society directed that the Medical History of Vermont regiments during the war be obtained, and Drs. C. P. FROST, G. B. BULLARD, and A. T. WOODWARD were appointed for that purpose.

The Committee on Nominations reported as follows:

For President—Dr. O. F. Fasset, of East Berkshire.

Vice-President—Dr. A. Houghton, of Pawlet.

Recording Secretary—Dr. J. S. Richmond, of Woodstock.

Treasurer and Librarian—Dr. Charles Clark, of Montpelier.

Corresponding Secretary—Dr. C. B. Chandler, of Montpelier.

Executive Committee—Drs. J. S. Richmond of Woodstock, W. H. H. Richardson of Montpelier, B. F. Sutton of Stowe.

Committee on Admission of Members—Drs. K. Russ of Pomfret, and E. Cushman of Orwell.

Publishing Committee—Drs. J. S. Richmond, C. B. Chandler, and A. C. Welch.

The committee also reported the names of the following persons as delegates to the various Societies named:

To Burlington Medical College—Drs. C. A. L. Sprague, and E. F. Upham.

New Hampshire Medical Society—Drs. H. D. Holten, and J. N. Stiles.

New York—Drs. L. C. Butler, and N. H. Knowles.

Rhode Island—Drs. Wm. McCallam, and H. A. Bartlet.

Maine—Drs. N. W. Fairchild, and H. Van Deusen.

Connecticut—Drs. G. W. Braley, and S. Putnam.

Massachusetts—Drs. C. L. Allen, and H. F. Stevens.

Connecticut River Valley—Drs. C. W. Brigham, and Kimball Russ.

American Med. Association—N. H. Knowles, E. A. Knight, J. N. Stiles, C. P. Frost, N. W. Braley, P. D. Bradford, Ezra Paine, H. D. Holten, J. S. Richmond, Daniel Campbell, Abraham Harding, A. T. Woodward, C. W. Brigham, W. M. Huntington, C. L. Allen, Horace Hatch, E. V. Watkins, O. F. Fasset, E. A. Pond, Saml. Keith, T. G. Simpson, Mark H. Convin, Lemuel Richmond, and L. C. Butler.

The same committee also reported the following as a committee of one from each county in the State, as a committee on epidemics. The object of the Society in ordering this committee is to procure a complete history of all epidemics occurring in each town of the State, from year to year. If its duties are faithfully performed the papers emanating from the committee will form an interesting and valuable contribution to medical science:

Windsor County, Simeon Belknap; *Franklin*, John Branch; *Orange*, N. W. Braley; *Caledonia*, — Brown; *Essex*, T. T. Cushman; *Orleans*, D. W. Blanchard; *Washington*, Samuel Keith; *Lamoille*, J. B. Morgan; *Grand Isle*, M. J. Hyde; *Chittenden*, L. C. Butler; *Addison*, — Warner; *Bennington*, M. J. Love; *Rutland*, — Jones; *Windham*, John Campbell.

The transactions of the Society were ordered to be published, together with the names of all its former and present members. A copy of the transactions is to be presented to all who have complied with the requirements of the constitution and by-laws.

It was also ordered that all papers designed for presentation to the Society at any of its meetings, shall be handed in to the Executive Committee, or a statement of their contents be presented to them before the meeting.

The Treasurer reported a somewhat plethoric condition of the finances when the Society adjourned.

the remedy has been used by some prominent practitioner, and the disease for which he used it. We find very few American formulæ in the book, and the publishers have committed a serious error in not adapting the work to the state of medical and pharmaceutical science in this country. For example, among the signs, etc., *Octarius*, a pint, is said to contain *twenty* ounces, which is *English* measure. In this country the pint contains *sixteen* fluid-ounces. The English official nomenclature is also adhered to throughout. With singular inconsistency the sign of *f.* for fluid-ounce, drachm, etc., is only used here and there through the work, being frequently used and omitted in the same formula. Now, every pharmacist knows that there is a wide difference practically between $\text{f}\text{3j}$ and 3j , and our standards specially call for a recognition of the difference, and publishers of foreign works in this country, should always conform them to our standards, or, at least, call *special attention* to the fact that they are not so conformed.

The work is very tastefully got up by the publishers.

A Manual for the Medical Officers of the United States Army. By CHARLES R. GREENLEAF, Assistant Surgeon, U. S. A. Philadelphia: J. B. Lippincott & Co. Pp. 199. Price \$1.50.

So complicated and numerous are the regulations of the service, in consequence of the duration and extent of the present war, that some convenient digest of them has been a growing necessity. Few medical officers, unfortunately, occupy themselves with those details so essential to prompt and correct army transactions, and hence the unnecessary accumulation of extra labor in the various medical bureaus. The little work of Dr. GREENLEAF will place this large class of surgeons, assistant surgeons, and hospital stewards, under great obligation, and essentially lighten the labors of the higher administrative officers of the corps. The Doctor is widely and favorably known for his devotion to the minutiae of an army surgeon's varied duties, and has furnished, in the little volume before us, a careful and complete synopsis of all that is needed in this useful direction.

The manual comprises full and concise formulæ for the departments of general hospitals, medical inspectors, medical directors, medical purveyors, staff surgeons and assistants, and regimental officers, contract physicians, together with a series of admirable hints on the important subject of discharge from the service.

No medical officer should be a day without this invaluable manual, and officers of other branches of the service, as well as citizens having transactions with the medical department, would find it of immeasurable advantage to be possessed of so useful a *vade mecum*.

C. C. C.

EDITORIAL DEPARTMENT.

Reviews and Book Notices.

The Book of Prescriptions; containing 3,000

Prescriptions collected from the Practice of the most eminent Physicians and Surgeons, English, French, and American. Comprising also, a Compendious History of the Materia Medica, Lists of the Doses of all Official or Established Preparations, and an Index of Diseases and Remedies. By HENRY BEASLEY, author of the "Druggist's Receipt Book," and "The Medical Formulary." Pp. 562. Philadelphia: Lindsay & Blakiston, 1864.

This is the second edition of a work that is well known to the profession. Though collections of this kind are frequently hurtful to medical science by inducing some practitioners to become mere routinists, they are often very useful to the medical man by giving him hints for making different combinations of his remedies.

The articles of the materia medica are taken up alphabetically, and after a brief historical notice several formulæ are usually given in which

Diphtheria: Its Nature and Treatment. With an account of the history of its prevalence in various countries. By DANIEL D. SLADE, M. D., being a second and revised edition of an essay to which was awarded the Fiske Fund Prize of 1860. Pp. 166. Philadelphia: Blanchard & Lea, 1864. Price \$1.25.

This is a new and revised edition of a work on a very important subject. It has been before the profession for four years, and has been well received. But little that is reliable has been written on the disease of which this monograph treats. Our author says: "Our knowledge of the nature, causes, and treatment of diphtheria is still lamentably deficient, and it is only by the most diligent study, and by the most careful observation that we may hope to arrive hereafter at more satisfactory results." In view of the fact that diphtheria has prevailed so extensively and so fatally in this country, it is surprising that there should be so little originality about this work, or that the author in his compilation should have depended so much on foreign observers. This shows the necessity of more attention being given by practitioners to recording their observations. In spite, however, of what we must regard as the defects above indicated, this is an exceedingly useful work, and we recommend it to the notice of our readers. We trust that the author will have the co-operation of practitioners, so that when a third edition is called for he may be able to add much to the value of a monograph on so important a subject.

The Army Surgeon's Manual: For the use of Medical Officers, Cadets, Chaplains, and Hospital Stewards: containing the regulations of the Medical Department, all general orders from the War Department, and circulars from the Surgeon-General's Office from January 1st, 1861, to July 1st, 1864. By WILLIAM GRACE, of Washington, D. C. Published by permission of the Surgeon-General. Pp. 200. New York: Baillière Bros., 1864. Price \$1.50.

The title page fully indicates the purpose and scope of this work which will be found an exceedingly useful if not almost indispensable companion to all connected with the medical department of our armies. Indeed we do not see how it could well be dispensed with, and wonder why so useful a work was not published sooner. Mr. GRACE has long been connected with the Surgeon-General's Office, and is well qualified for the undertaking.

Part I. comprises a list of the medical staff of the U. S. Army, July 1, 1864. This list seems to us, however, to be very incomplete. Part II. comprises regulations for the medical department from the revised regulations for the army. These the surgeon should always have at hand. Part III. contains general orders relative to the medical department, also important for constant reference. Part IV. gives the general orders from the Surgeon-General's Office, dating, however, only from May, 1862, soon after the appointment of Dr. HAMMOND, as Surgeon-General.

Glaucoma: its Symptoms, Diagnosis, and Treatment. By PETER DIRCK KEYSER, M. D. Philadelphia: Lindsay & Blakiston, 1864. Price 75 Cents.

This is a beautifully printed brochure of eighty-eight pages on a subject of growing interest to the profession. The substance of the work is from notes taken by Dr. Keyser while attending the clinical lectures of Professor VON GRAEFE, during the winter of 1863-4, in Berlin. He has compiled and published them thinking they would not only be of interest, but of advantage to the medical profession in this country.

After eleven pages occupied with the historical part of the disease up to the period when iridectomy was introduced, he observes "My own experience of the beneficial effects in iridectomy in glaucoma enables me not only to recommend the operation most strongly; but even to trust to no other remedies as they have all proved insufficient, and most valuable time would thus be permitted to pass irrevocably away, when an iridectomy might still save the eye."

Page 12. After describing the symptoms of inflammatory and acute inflammatory glaucoma, he remarks that there is also a hemorrhagic form which is peculiarly dangerous, and it is far less favorably influenced by iridectomy.

Page 33. "In chronic glaucoma the patient and his friends must be warned beforehand, that the operation is not performed for the sake of giving sight, but only in order to relieve, if possible, the pain." Also "when the disease has run its course VON GRAEFE terms it glaucoma absolutum, then all chance of benefitting the sight by an operation is past."

Page 43. Non-inflammatory and secondary glaucoma is then treated of. On page 64, he states that glaucoma is a disease of old age, females appearing to be more subject to it than males. He concludes by giving the ophthalmoscopic symptoms, prognosis, and treatment, but he should have stated in detail, how the operation is to be performed, and the instruments to be employed. There are no statistics of successful and unsuccessful cases, and we should judge that the writer has never performed the operation himself, on the living subject, or he would have found a great deal of difficulty in the removal of the iris "up to its ciliary attachment." (see page 85.)

By a reference to Dr. TURNBULL's papers on this subject in former numbers of the REPORTER there will be found a careful detail of the steps of the operation, the difficulties to be met with, and the proper instruments to be employed. Indeed Dr. TURNBULL has, through our columns given the latest and most complete information on glaucoma, compiled from various sources. We trust that he will feel justified in collecting, amending, and republishing his paper on diseases of the eye and ear for the benefit of the profession.

We would add, in concluding our notice of this pamphlet, that we think it highly creditable to the author as a literary production, giving a complete resumé of the history, symptoms, diagnosis, and treatment of this formidable disease, and the neat getting up of the work by the publishers is worthy of special commendation.

MEDICAL AND SURGICAL REPORTER.

PHILADELPHIA, JANUARY 7, 1865.

1865.—GREETING.

For the fourteenth time we give to our profession words of greeting on the advent of a new year. To our country the past year has been one of steady, triumphant progress, and the prospect is fair that the time is not far distant when, so far as our civil troubles are concerned, we shall once more be at peace. Whether we shall be at peace with "the rest of mankind" will, we presume, depend on how they settle some scores that have accumulated against them.

To our profession the past year has been one of prosperity. Its services have been in active demand, the supply of recruits scarcely equalling it. Death has removed but few of the shining lights of our profession during the year just closed; this city, however, contributing more than her share of the number.

The periodical literature of our profession suffered much the past year, and some of our valued cotemporaries have been compelled to suspend publication altogether. The cause has been the extraordinary increase in the cost of publication. Those of our cotemporaries, the newspapers and magazines, which were not compelled to suspend, were obliged to advance their subscription rates from fifty to a hundred per cent. The medical journals were more backward about taking this step, and lost heavily in attempting to avoid it. From this cause our issues during the past year were very irregular, and, to avoid a more serious disaster, we found it necessary to omit about three months. These numbers will not, however, be lost to subscribers, but will be made up to them in the issues of the current year.

In our estimates of expenses for the current year we have endeavored to avoid the error of the past, and have infused capital into the enterprise which, with our immense circulation, will, we believe, enable us to avoid all irregularities in the future. The co-operation of the friends of an independent periodical medical literature is earnestly invoked, that we may make the *REPORTER* a worthy exponent of American Medicine and Surgery. A very little effort on their part will enable us to secure for our pages literary contributions of the highest character. The material is abundant, and we have practical men and writers equal in ability to those of any nation. Let us, therefore, no longer be depen-

dent on Europe for our medical periodical literature.

PHYSICIANS' CLUBS.

A movement is on foot among some of the prominent members of the profession in the city of New York for the formation of an association or club, having rooms supplied with all the current periodical and monographic medical literature of the day.

The following circular gives an indication of the plan proposed, and shows the respectable character of the movement:

NEW YORK, Oct. 23, 1864.

SIR:—At an informal meeting held at the house of Dr. I. E. TAYLOR, Dr. DELAFIELD in the Chair, and Dr. C. D. SMITH, Secretary, and thirty gentlemen present, it was proposed to establish in New York City a library of Periodical and Monographic Medical Literature, on the following general plan: When a permanent organization is effected, rooms will be secured in a central locality, and measures taken to obtain the regular receipt of all the Medical Periodicals now, or hereafter, published in the world, and all the Monographs as they are issued.

As the funds of such Association accumulate, and as far as they will from time to time permit, it is proposed to obtain the back volumes of all the Medical Journals, and also all the Monographs as yet published in any and all languages, with the design of rendering the Library ultimately complete in this kind of medical literature.

It is proposed, also, to render the rooms of the Library a pleasant evening resort for the profession, and thus give to the Association a social character, on the plan of a club.

It was estimated that the Annual Subscription of each member would be about ten dollars.

If the purposes of the proposed Association meet your approbation, the Committee appointed to submit the above proposition to the profession respectfully solicit your application for membership by letter, or verbally, to either of the undersigned. You will then be invited to attend the meeting for permanent organization.

EDWARD DELAFIELD, M.D., 2 E. 17th St.
GURDON BUCK, M.D., 121 E. 10th St.
ISAAC E. TAYLOR, M.D., 13 W. 20th St.
S. C. FOSTER, M.D., 59 W. 35th St.
H. W. BULKLEY, M.D., 42 E. 22d St.
S. S. PURPLE, M.D., 183 Hudson St.
B. I. RAPHAEL, M.D., 91 9th St.
O. WHITE, M.D., 52 W. 12th St.
E. NOEGGERATH, M.D., 125 Waverly Pl.
STEPHEN SMITH, M.D., 55 W. 34th St.

Committee.

Such an association of physicians for the purposes indicated in the above circular would meet with our unqualified approval. We have on several occasions in the pages of this journal

advocated the formation of just such associations. In January, 1854, we had the honor to read a paper entitled "Doctors' Commons," before the District Medical Society for the County of Burlington, New Jersey, in which we advocated the formation of libraries and pathological collections by our State and County Medical Societies. The following are the concluding paragraphs of that address, and our readers will bear witness to the remarkable coincidence of views as expressed in the circular quoted above, and in our address of 1854. The address was published in full by request of the Society, in the *New Jersey Medical Reporter* for February, 1854, and also in pamphlet form.

"Third, and lastly,—I would carry the same principle as far as practicable, into our cities, towns, and villages. Wherever there are two or three physicians, I would have them hold a room in common, in a public part of the town, easy of access, and known as '*the doctors' room.*' Here let each physician deposit, for the time being, such books from his own library, and such specimens from his cabinet, as he can spare, each marked with his own name, and the whole properly secured in glass cases; each physician being provided with keys to open them. Then, at suitable hours each day, let this room be thrown open to the public. Let there be here, skeletons of the human frame, wired and natural, for the inspection of the curious non-professional inquirer. Let the room be attractive in size and furniture, and be a common resort at all hours for the profession of the place where they may meet, as they have opportunity, for social converse, and where they may hold frequent stated meetings of a professional character, and where, in the larger towns and cities, there may be on proper days, certain hours in which the physicians in rotation, could meet, and prescribe for the poor. I need do no more than mention the advantage of such an arrangement to the medical student. The physicians might agree to subscribe for different medical periodicals, and thus have the advantage of receiving medical intelligence from various sections of the country, and from abroad. The profession and the public too, would thus often enjoy the advantage of reference to valuable collections in mineralogy, botany, conchology, etc., etc., and the body of physicians in the place, would, necessarily, command more entirely the respect and confidence of the public. The trifling expense of furnishing such a room, is not to be thought of, in view of the great advantages that would result.

"Such frequent intercourse among physicians, as the proper carrying out of these plans would require, would make them too well acquainted with each other to render it possible, except in very rare cases, that any serious misunderstandings should arise between them, and the medical profession would present the grand spectacle of the devotees of a benevolent and useful science laboring *unitedly*, and earnestly, to promote the welfare of mankind. Then would this temple of science present to the popular view, one massive structure, whose integral parts are fused into a whole, against whose broad and deep foundations the surges of popular superstition and error dash in vain, and whose fair and faultless proportions, as they loom up against the gathering clouds, bid defiance to storms and tempests."

Of course, if good is to result from such associations as are proposed above, there must be some check upon them. The fact must not be lost sight of that they are, in a sense, scientific as well as social, and everything calculated to demoralize must be rigidly excluded. There are associations in all our large cities, social, mercantile, and other clubs, whose influence over their members is evil. This arises generally from evil surroundings, and particularly from the fact that intoxicating liquors are sold on or near the premises, and that objectionable practices are allowed within the precincts of the building. We should expect in an association of *medical* men that no such irregularities would be allowed.

We earnestly hope that the proposed association will be formed, and that the example will speedily be followed in other cities and towns. Our nation is just casting aside the follies and waywardness of youth and passing into the strength and vigor of a most perfect manhood, and our noble profession has in common with it a future before it which that of no other nation can rival if we are true to ourselves. Such associations may be made the means of doing much to aid us in our advance toward the fulfillment of our high destiny.

ARTIFICIAL LIMBS.

The present sanguinary war has proved a powerful stimulus to inventive talent; and in nothing more than that of artificial substitutes for mutilated limbs. We have noticed from year to year with no small interest, the gradual improvements introduced into this department of surgical appliance, such as experience and observation have suggested; and while most of

them are exceedingly creditable to their respective authors,—far superior, indeed, to either French or English productions,—yet, one could not but feel there remained great room for more simplicity in the mechanism designed to imitate the movements of the natural member. To what extent improvement in this direction is feasible, time alone can develop.

We have had recently several opportunities of examining and witnessing the working properties of the artificial limbs of Messrs. KIMBALL & LAWRENCE, a firm recently established in this city in Arch street below Seventh. They are constructed from a material (vulcanized rubber) which they claim, under their method of treatment, is comparatively unaffected by either heat or cold. In the arm the contrivance for communicating the required movements is exceedingly simple, durable, and effective, admitting of such a variety, freedom and facility of motion as to wonderfully approximate the functions of the natural extremity.

A party present, who was wearing one of these limbs, played, with no small degree of skill, on the violin, tossed up his handkerchief catching it as it fell, and exhibiting several other equally difficult feats.

In the lower limb there is the same simplicity observed in its construction. The articulation at the knee is at once original and ingenious, combining the properties of precise movement with durability, in so eminent a degree, that it would appear impossible for it to become disarranged. The exclusion of the perishable cords which are ordinarily introduced to impart certain movements to the foot, constitutes another noticeable feature in this limb.

All of the artificial substitutes which we had the privilege of examining, were exceedingly light and of the most beautiful execution. Any member of the profession would be well repaid by visiting the manufactory of these gentlemen, and witnessing the various processes in operation for the production of their work.

We are informed that large numbers of maimed soldiers, in the hospitals of this city, have petitioned that the limbs of this firm be included among those furnished by Government.

This city has become the chief resort for maimed soldiers, attracted hither by the worldwide celebrity of the artificial limbs of our townsman, Dr. B. FRANK PALMER. KIMBALL & LAWRENCE claim some advantages for their limbs over those of PALMER, and appearances are certainly in their favor, but time must determine whether they possess the strength and

durability of the latter. There is a very wide field for the exercise of ingenuity and skill, and as it is hardly to be supposed that any invention is incapable of being improved, Mr. PALMER, himself, or some one else will undoubtedly improve his hitherto unrivalled artificial leg and arm.

THE MEDICAL PROFESSION IN THE ARMY.

The medical staff of the army is making for itself a noble and imperishable record by its intelligence, endurance, and patriotism. Instances are not wanting where medical men have entirely laid aside their profession, and taken up that of active combatants. Thus, the surgeon stationed at Fort Sumter at the outbreak of the war, is now a brigadier general in active service, and has been a prisoner in the hands of the enemy. A prominent physician of West Virginia was recently killed in an engagement in the Shenandoah Valley campaign while acting as commanding officer of a regiment. We have heard of instances in severe battles, where the loss of officers has been great, of medical officers taking their place and leading troops in the charge.

But there are enough instances of heroism in members of our profession while in the legitimate discharge of their duties. Some have lost their lives, and others have been wounded while attending to their duties in collecting and caring for the wounded on the battle-field. Indeed we are informed that surgeons have often exposed themselves to danger on the battle-field with a recklessness, which, under the circumstances, was almost criminal, as their lives are of too much consequence to justify them in allowing their eagerness to serve the wounded, to lead them into positions where they are greatly exposed. Indeed, on such occasions, the arduous duties they are called upon to discharge are a sufficient tax upon their physical powers, without their running the risk of being cut off by the bullets of the enemy. During great battles there are no surgeons to spare to be carried to the rear on a litter. Yet the duty often devolves upon us to record the fact that surgeons have been killed or wounded in battle.

Another way in which surgeons have shown their heroism and earnest and patriotic devotion to duty has been by remaining with the wounded on the battle-field when the fortunes of the battle have been against their friends, and they left within the lines of the enemy, bring upon themselves the risks, severe trials and exposures

incident to captivity and imprisonment in an enemy's country. A marked instance of this kind of heroism on the part of our surgeons occurred during the Seven Days' Battles before Richmond in 1862, when Dr. SWINBURNE, of New York, and a number of other surgeons remained with the large field hospital of wounded troops at Savage's Station after it had fallen within the enemy's lines, and were taken prisoners.

Bravery on the part of army and navy surgeons, whether in or out of the line of strict duty is the more commendable as it has not the stimulus of hope of advancement. There is not a private in the army who may not by personal courage win for himself some substantial acknowledgment of appreciation from the Government. Not so the surgeon. No matter what heroism he displays, his status is fixed, his promotion is not influenced thereby. It is right that it should be so, perhaps, as his office is not one in which personal bravery on the battle-field is expected, or even proper. His reward must consist in the consciousness of duty well performed, and his hope for promotion must be founded on a faithful, intelligent and conscientious discharge of that duty.

Occasionally, however, we meet with an "honorable mention" of the services of a surgeon, like the following in a recent order of Major-General BUTLER of the Army of the James.

Surgeon GEORGE DE LANDRE One Hundred and Fifty-eighth New York, while under fire, worked faithfully day and night, dressing the wounds of those who required attention without reference to corps. It is to be deplored that our regulations allow substantially no promotion to a surgeon, but for a gallant man to do his duty in such a manner is sufficient reward.

It is not to be denied, however, that there is another and an unfavorable aspect in which we are sometimes compelled to view members of our profession in the army. But it is comparatively seldom that our surgeons disgrace themselves and their noble calling, and we venture the assertion that when such is the case, the cause can be expressed in three brief words—*rum did it!*

We have occasionally been pained to hear sick and wounded soldiers complain of the hard-heartedness and cruelty of their surgeons—of the lack of proper provision and supplies for their transportation, merely from neglect of ordering them. Sick and wounded men have been sent hundreds of miles with no provision whatever made for their comfort, or sustenance, even. Such neglect is criminal, and should meet with condign and prompt punishment. We wish

they could always be dealt with as vigorously as the following case of recent occurrence. We have no sympathy for such men.

Dismissed.

Assistant Surgeon CHRISTIAN MILLER, of the Eighth United States Colored Troops, having been put in charge of the transportation of one hundred and fifty, as he admits, wounded men who had nothing to eat all day, as he reports, left Deep Bottom without making any preparation for their comfort or providing for them food, and when reaching Bermuda Hundred was found personally intoxicated from, as he says, a grain and a half of morphine, and a half gill of whisky, so as to be unable to do his duty, is ordered by Major-General BUTLER to be, and is dismissed the service of the United States with the loss of all pay and allowances, subject to the approval of the President.

Such, however, we are thankful to say, are rare exceptions to the general rule as regards the status of our profession in the Government service. The large majority of our army and navy surgeons, by their superior qualifications and intelligence have done honor to their calling, and commended themselves to the love and gratitude of the soldiers, the sailors, the Government and the country.

Notes and Comments.

Surgeon-General of New York.

We observe with much satisfaction, that Dr. S. D. WILLARD, of Albany, has been appointed Surgeon-General of New York on the staff of the newly-elected Governor FENTON. His appointment will be well received by the profession of that State, with whom Dr. WILLARD is deservedly popular for his unremitting labors to promote the interest and usefulness of their noble State organization—the Medical Society of the State of New York.

The Medical Schools.

We learn that in the medical department of the University of Pennsylvania there are about four hundred and fifty matriculants, and in the Jefferson Medical College in this city over four hundred. In the Bellevue Medical College, New York, there are over two hundred, and the other schools of that city and in other sections of the country have very good classes, though it is probable that the political excitement that prevailed about the time the lectures began, and the prospect of a draft, operated to diminish all the classes somewhat.

The medical college of Ohio, contains the largest class that has assembled in its walls for fifteen years.

There are about one hundred students in the medical college located at Keokuk, Iowa.

Promotion.

Dr. CH. F. J. LEHLBACH, formerly connected with this journal and who has been for some time Assistant Surgeon of the Seventh New Jersey Regiment, has been made Surgeon of the same.

Ligating the Arteria Innominata.

In the REPORTER of September 25th, in a communication relating to the successful ligation of the *Arteria Innominata* in New Orleans it was stated that the operation was performed by Dr. A. W. STEWART. This is an error, Dr. DAVID L. ROGERS, who was present and aided in the operation, writes us: "the honor of the first successful operation on the *Arteria Innominata* belongs to Dr. A. W. SMYTH, Surgeon of the Charity Hospital, New Orleans."

We make the correction with great pleasure.

A Proposition.

A subscriber to the MEDICAL AND SURGICAL REPORTER, not a resident of this city, who thinks that the work ought to be sustained by the profession, and who appreciates the difficulties with which it has had to contend for several years past, makes the following proposition, which, as a spontaneous expression of good will and interest in the success of our enterprise, we feel bound to reproduce. He says, "Suppose one hundred of your subscribers advance ten dollars to be credited as a pre-payment for the REPORTER, in addition to the regular subscription [for the current year.] I act on my own proposition, and hope the example may be followed by others, and meet your approbation."

Although, as announced elsewhere, capital has been secured sufficient, with good management, for present purposes, it has been obtained at a sacrifice, and is subject to recal. The plan proposed above would be effectual and permanent, and add value to the capital already secured, and enable us to increase still more the literary worth and usefulness of the REPORTER.

Those who respond to the above proposition will be credited eleven dollars on their subscription account.

Webster's Dictionary.

Every reader of the REPORTER is familiar with WEBSTER'S Dictionary, probably most of them possess a copy of one of the abridged editions.

We all know, too, that WEBSTER'S is a standard dictionary, not only in this country but throughout the world. With many, as with us, it is *the* standard. We have, before us, WEBSTER'S *New Illustrated Royal Quarto Dictionary*. This edition of 1840 pages, with 3000 engravings, is just issued, and seems to be all that one wants in a work of the kind. Those of our readers who do not possess this edition, know not what it is to have a dictionary. Professor HITCHCOCK says that it "excels all others in defining scientific terms." It has often been our experience to turn with disappointment from medical dictionaries to find in WEBSTER precisely what we wanted. We have frequently spoken of it as in many respects the best medical dictionary we know of.

In this edition the illustrations are inserted, both in the body of the work and separately at the end. Besides the definitions of words ordinarily looked for in a dictionary we find an "Explanatory and Pronouncing Vocabulary of the Names of Noted Fictitious Persons and Places," etc.—"Albany Regency" and "Bob Acres" are specimens under this head; "Etymological Vocabulary of Modern Geographical Names," "Aven, Avon (celt). Water, a river; as *Avenburg* (town on a stream), *Avondale*, *Strathaven* (valley of the Avon)," is a specimen; "Pronouncing Vocabulary of Modern Geographical Names;" "Pronouncing Vocabulary of Common English Christian Names with their derivation, signification, and diminutives, or nicknames, and their equivalents in several other languages;" a dictionary of quotations from the Greek, the Latin, and modern foreign languages, rendered into English; "Arbitrary signs used in Writing and Printing," etc., etc. In fact, one can scarcely conceive of a subject on which he desires information which cannot be obtained from this dictionary.

Books Received.

The following books have been received, not heretofore acknowledged:

"*Materia Medica and Therapeutics.*" By STILLÉ, 2 Vols. From Blanchard & Lea.

"*Glaucoma; its Symptoms, Diagnosis, and Treatment.*" By KEYSER. From Lindsay & Blakiston.

"*On Surgical Diagnosis.*" By McLEOD. From Lippincott & Co.

"*Diseases of the Reproductive Organs.*" By ACTON. From Lindsay & Blakiston.

"*On Surgery.*" By GROSS, 2 Vols. From Blanchard & Lea.

"*On Diphtheria.*" By SLADE. From Blanchard & Lea.

"The Army Surgeons' Manual." By GRACE. From Ballière Bros., New York.

"On Wounds and Injuries of Nerves." By MITCHELL, MOREHOUSE, & KEEN. Lippincott & Co.

Army and Navy Journal.

We would call the special attention of our readers to the excellent and reliable weekly named at the head of this article. Besides being a truthful record with observations from a military stand-point, of all military and naval operations, it contains much that is of special interest to medical men, particularly those connected with the army or navy. The editorial comments on military and naval operations, if not as fresh and sensational as those of the daily newspapers, are far more satisfactory, because based on official records, and made by an expert.

The *Journal* is edited by Captain W. C. CHURCH at 39 Park Row, New York. Subscription price six dollars per annum in advance. We will furnish the *Journal* and the *REPORTER* for nine dollars for a year.

Correspondence.

FOREIGN.

LETTERS FROM Dr. W. N. COTE.

September 9th, 1864.

Animalcular Origin of Disease.

In a paper recently addressed to the Academy of Sciences, Drs. LEPLARD and JAILLARD examine whether microzoaria are the real causes of the diseases in which their presence has been ascertained in the human body. You are aware that in their endeavors to explain the origin and propagation of contagious disorders, physicians have often attributed these affections to the existence of invisible animalcules, parasites, or impalpable ferments. This hypothesis was extremely plausible, and received a superstructure of various medical theories, but these had still to be verified, for while it was necessary to prove that there exist cryptogamous plants and infusoria capable of engendering diseases. Various attempts have been made to solve this important problem, and observers of unquestionable merit, considering all kinds of virus to be ferments, and ferments to be animated beings, have not hesitated to attribute to infusoria the development of carbuncle, typhus

fever, and other affections, because they had found such microscopic animalcules in the blood of subjects that had died of those maladies. Our authors are of opinion that such assertions are, at least, premature, and ought to have been supported by more direct evidence than that as yet adduced. Thus, instead of inoculating animals, as some have done, with the blood of subjects laboring under carbuncles, a blood in which the microscope can detect but very few of the elements it contains, they think it more advisable to operate with bacteria free from all other accessories, which might either rightly or wrongly be suspected of being the active principles of the disease. Bacteria, as your readers are aware, are infusoria of the genus vibrio; under the microscope they have the appearance of threads, and they are developed in all liquids containing animal matter in a state of decomposition. It is therefore very easy to procure these animalcules, and our authors have performed a series of experiments, by injecting liquids containing them into the cellular tissues, and even the veins of rabbits, dogs, and other animals. These experiments show that the introduction of bacteria or vibrios into the blood causes no virulent disorders, although the putrified substances introduced may produce the effects of poison.

International Medical Congress.

I have now before me the draft of the convention proposed by a committee of the International Medical Congress at Geneva, for general adoption, and agreed to, and to which I referred in my preceding letter. I think it well to place it before your readers.

"The undersigned plenipotentiaries assembled in congress at Geneva, have adopted the following arrangements to be observed in case of hostilities breaking out between their respective countries:

1. Ambulances and military hospitals shall be recognized as neutral, and as such, protected and respected by the belligerents as long as they shall contain sick or wounded.

2. All the sanitary staff, including physicians and surgeons, apothecaries, attendants, officials, and generally all persons attached to the service of hospitals and ambulances, shall be considered neutralized.

3. The above-mentioned persons shall be permitted, even after occupation by the enemy, to continue to fulfil their duties in the hospital or ambulance to which they are attached, as long as shall be necessary, after which they shall be

allowed to depart without being in any way hindered or inconvenienced.

4. These persons, however, shall not be permitted to remove any articles but those which are their own private property. All materials employed in the arrangement of the ambulance or hospital will remain subject to the rights of war.

5. The inhabitants of the country, who may be employed in the transport of the wounded, or in bringing them assistance upon the field of battle, shall be equally respected, and remain entirely free.

6. Soldiers badly wounded, whether already received into the ambulances and hospitals, or whether picked up upon the field, shall not only have their hurts attended to irrespective of their nationality, but shall also not be made prisoners. They may return to their homes, upon condition of not again taking up arms during the course of the campaign.

7. A safe conduct and, if necessary, the costs of the route, shall be handed to soldiers mentioned in the preceding article, when, after cure, they leave the place where they have been nursed.

8. Articles requisite for the sick and the persons attached to the ambulance, shall be supplied to the army in occupation, which shall be subsequently repaid the outlay shown to have been incurred, by receipts furnished for the purpose.

9. A distinctive and uniform armlet shall be adopted by the sanitary officials and staff of all armies. An identical flag shall also be employed in all countries, to distinguish ambulances and military hospitals. The armlet and flag shall be those agreed upon by the International Conference which met at Geneva in 1863, (a red cross upon a white ground.)

10. Those persons, who, without being entitled to wear the armlet, shall adopt it to enable them to act as spies, shall be punished with the full rigor of military law.

11. Similar stipulations to the preceding, relative to naval warfare, shall form the object of a further convention between interested powers.

Oxygen and Ozone.

M. St. EDMÉ publishes certain experiments from which it appears; that oxygen separated by the electrolytic process from a binary compound is not ozonized, and that this state only manifests itself when the decomposing power of electricity has been brought to bear on a double

chemical affinity. M. St. EDMÉ is consequently inclined to suppose that ozone is but a different dynamic state of oxygen, and not a chemical or physical transformation.

Mineral Waters.

Professors CAMPANI and GABRIELLI, of Sienna in Italy, have recently been examining the mineral waters of Le Gailleraie, near Radicondoli, in Tuscany; the former in a medical, and the latter in a chemical point of view. From the account they have published, it appears that these springs issue from calcareous rocks and schisters of the Eocene period, all more or less metamorphosed and dislocated, and traversed by masses of serpentine combined with smaragdite; all pointing to a period of volcanic convulsion. There are three different mineral springs at Le Gailleraie, whither patients from all parts of Tuscany resort in the summer months. The first of these springs is sulphurous and contains, besides the sulphates of lime, magnesia, protoxide of iron and ammonia, the bicarbonates of the three former substances, a large proportion of free carbonic acid, hydro-sulphuric acid, oxygen and nitrogen. Its temperature is 49° C. The second spring is acidulous, and contains besides carbonic, hydrosulphuric and sulphuric acids, also chlorine, the chief alkalies and a little iron. Its temperature is 26° C. The third is ferruginous and acidulous, but only differs in quantity from the composition of the first mentioned one—temperature 29° C. In the medical part of the pamphlet, Professor GABRIELLI states that the hot spring of La Gailleraie, if used with caution by immersions of short duration will cause a salutary irritation on the skin, restore some suppressed eruption, produce artificial exanthemas, etc. It is useful in chronic catarrhal affections, muscular rheumatism, contraction, rigidity of the joints, and paralysis; it may be applied in the form of shower-baths in chronic swellings, etc. The second spring is to be used internally in the case of intermittent fevers and gastric impediments, for which it is celebrated. Experiments have shown that it produces beneficial effects in gravel and similar complaints. The third spring, the temperature of which is rather below that of the body, ought not to be used by persons of delicate constitution, and generally the immersion should be of short duration, in which case it will produce a vital reaction and promote warmth on the surface of the skin, excite the circulation, and exercise a tonic action in consequence of the iron it contains. It has been found useful in

scrofula, and in many cases producing the same effect as sea-bathing. It may also be used internally in cases of dyspepsia, and during periods of convalescence after long illnesses; also in scorbutic affections, and obstruction of the liver.

W. N. CÔTE.

Points of Contact on the Boundary Line

BETWEEN THE

LEGITIMATE PROFESSION OF MEDICINE AND QUACKERY.

EDITOR MED. AND SURG. REPORTER:—

Firmly believing that your paper is an able advocate of every thing which tends to elevate the standard of the medical profession, in its social and political, as well as scientific relations, I solicit the privilege of a space in your columns for the following article on the inosculation of the regular profession and quackery.

The name of quack is applied to any unprincipled pretender to arts which he does not understand, but it is generally used to designate vain boastful pretenders to physic, who proclaim their medical abilities in public places.

These ignorant tricking practitioners in medicine, constitute a race which may be classed with bogus jewelry pedlars, fraudulent lottery speculators, and all such like "sharpers," who take advantage of the simple-minded. They are, we believe, even more dangerous to mankind than any of those who are guilty of such heinous illegal practices for obtaining money. The names, thief, robber, burglar, or swindler, meet condemnation the moment they reach the ear of every right-minded man, but the quacks, unrestrained boldness and false pretensions afford him a passport to the confidence of the unwary, so that he can, with an air of authority, command the means, and maltreat the constitutions of those who fall a pray to him, without the slightest danger of his being called to account for his behaviour.

Fortunately the most brazen-faced quacks are easily detected, and every intelligent man holds them in contempt, and medical men join in denouncing them, and wonder how they can impose on rational beings to such an extent. Did quackery always manifest itself in this unmistakable form, few would be deceived by it, but as illegitimate practice, like counterfeit money, is made to resemble very closely the genuine article, and the regular practice in the hands of some is reduced to a rather quackish standard, it requires close attention to observe where right

ends and wrong begins. The thoroughly educated, conscientious physician finds no difficulty in keeping within the lawful bounds of the medical profession, but there are some who fail to observe the line of demarkation between the legitimate practice and quackery. That inability on the part of some to keep within the territory of the science and art of medicine, doubtless arises, either from a want of confidence in the science which they have tried to learn, but failed to comprehend, or else from their being affected with the quackish diathesis, the pathology of which is a want of conscientiousness and love of gain. It is interestingly ridiculous to observe how some members of the profession lament the depravity of human nature as manifested by imposters in medicine, while, by a little dissection, you can readily trace some of their own proceedings to an anastomosis with that which is decidedly quackish.

One could be led to pity and forgive a poor young practitioner who might be tempted to sell his professional rights for a mess of potage, but when those of mature years and in affluent circumstances, who can ride through the streets in comfortable conveyances ornamented with coachmen, hardly deigning to bow their aristocratic heads to the humble disciples of Esculapius—when they descend from their sublime positions to practice the "hocus pocus" healing art they become most worthy of derision. It seems hardly possible that those who ought to be lights in the profession would bow at the shrine of quackery, but we believe that such is occasionally the case. Even in New York and Brooklyn, where medical men are blessed with every privilege which could enable them to maintain their professional dignity and honor, there are those to be found who have dared to sow tares among the wheat. We may err and make unjust charges, but not if we know right from wrong.

Relying on the knowledge of the science of medicine as taught in the regular schools of the United States of America, and the Hippocratic oath as the proper guide to an honest and honorable practice, we hesitate not in condemning some of the proceedings which have been recently brought to our notice.

The violation of professional etiquette is the first step usually taken toward quackery, and is, perhaps, most frequently observed in what is termed stealing practice. There are medical men who hold themselves ready not only to attend but to retain patients when their regular physician cannot be found, and assume charge

of patients before the attending physician has been discharged or paid his bill, whenever such patients may desire a change. Now this may be improperly termed stealing practice, but it certainly gives encouragement to those patients who wish to act a rascally part toward the attending physician, and it shows that some medical men have no regard for the rights of their fellow practitioners, which is about as bad as theft.

There is another trick practiced in this locality—we hope it is unknown elsewhere—by some who are not blessed with the most admirable spirit. When they require counsel, or when those who employ them, do so, they avoid calling in any member of the profession in their own city, lest it might be thought that any brother practitioner was possessed of skill superior or equal to their own. Such groveling proceedings are certainly mean, and far from what is expected from the most superficial members of the profession. The good-natured and philosophical might bear with such things, and look upon them as wayward steps which the weaker part of our fallen race are tempted to take, but what we have now to relate, and which we wish particularly to bring to notice is, we believe, quite sufficient to merit unmitigated condemnation from every one sufficiently sane to be permitted to practice the science of medicine and surgery.

It appears that there are physicians in New York and Brooklyn who are in the habit of calling to their aid in treating their patients a New York gentleman whom we hardly think is qualified to be a consulting physician or surgeon. Not that we have anything against the man who might follow the plough, or fill a place in a workshop with credit, but as this gentleman makes himself known in public as a practical manipulator and electrician, and professes to cure a vast number of infirmities by rubbing, pinching, squeezing, etc., somewhat after the quack movement cure system of which we hear so much in our daily papers, we think him hardly a wholesome associate for members of the regular profession.

This gentleman, it appears, has the power of giving new vitality to the paralyzed muscles, and of rubbing out sprains, palsies, gouts, and rheumatism at the points of patients' toes and fingers; so wonderful is the efficacy of his touch.

We understand that his treatment is particularly appropriate to the delicate sex, and the doctors, who are so extremely modest and refined that they are shocked at the thought of

treating female diseases, send their sound lady patients to him to undergo his treatment and even to have their mammae and kindred organs rubbed for the good of their health. A very virtuous way for the doctors to practice medicine surely! Indeed, so imposing is the reputation of this man that some of our metropolitan doctors send him many of their patients to be treated, and also have him to visit others at their own homes for the purpose of rubbing them up to the standard of health. In short these doctors are a kind of "runners" who receive a per centage for sending patients to this manipulator who might "keep a very good hotel," but is undoubtedly a quack having no relation to the medical profession. As we have not heard of these doctors having renounced the regular profession we presume that they have tried by some form of sophistry to reconcile their behaviour to the medical code of ethics, but how they could do so is hard to imagine.

Perhaps the doctors fully believe that the manipulator is possessed of some supernatural power of curing disease, and we doubt not but he can cure the doctor's patients when they fail, but if they would read medical books on the practice of medicine and therapeutics they would find the use of electricity, passive motion, friction, etc., fully explained, and if they are *compos mentis* they would be able to obtain all the benefits of these agents without going outside of the regular profession for them. Perhaps they take a more overwhelming course of reasoning, assuming as their premises, that certain cases require rubbing, and that they send only such patients to the manipulator. As the doctors likely may have some rich patients, this amusing treatment may be very suitable to many of them. Reasoning in the same way they will also see how some of their patients would be benefitted by packing, shower-baths, douches, and such means as the hydropathists employ for the cure of disease, while others might require a few homœopathic pills.

If the doctors take that ground we expect soon to see them in the full glory of their position, sitting in their offices and giving orders for one patient to go to the manipulator, another to a hydropathist, and another to a homœopathist. Should they come to this (as they seem to be heading that way) they may still be of as much benefit to mankind as ever they were, but we fear they will give the public to understand that the regular practice, in their hands, is a very simple business.

As the doctors have now had considerable

experience with the manipulator they must be pretty well skilled in his system of practice, and we would expect to see them rubbing out disease themselves, but as they have not, so far as we know, used the remedy it would appear that they believe the manipulator to be possessed of some superhuman gift of touch—that he has healing in his fingers. If these doctors are so far enslaved by the marvelous and superstitious as that, we would recommend them to give up the tedious study of science, and pray to the gods for some such like gift of healing as that of their colleague.

They make very good candidates for a place in the ranks of clairvoyants and astrologists, and the members of the regular profession will, no doubt, excuse them for retiring from among them if they are so disposed.

Small would be the loss to the profession! For though their opportunities for advancement are great they add nothing to the science or ethics of medicine, but are instrumental in debauching the public mind, and inducing young men to follow in their footsteps. And when they take young men as students who have nothing of quackery in their constitutions, and when getting them safely through their course of studies, they send them right from their alma mater with the Hippocratic oath ringing in their ears, to be rubbed by a quack, we think that they "have a devil," and that they are likely to bring up seven devils worse than themselves.

We sincerely hope, however, that these doctors are not past redemption, and that they may be led to see the depravity of their professional condition, and to turn from it to the path which belongs to every man of true science.

They have it in their power to belong to the number of those whose highest ambition is to maintain the reputation of the medical profession, or they can act the part of the wolf in the fold—may they choose the better part!

We are proud to think that the profession of medicine in this country is fast approaching to that high position which it has never attained in any other nation. We hope soon to see the day when the medical corps will be as jealous of their rights as they are now skilled in science; when the line of demarkation between the regular profession and quackery will be as broad as that between christianity and infidelity, and even the lowest will be above all mercenary transgressions.

TOGER.

News and Miscellany.

The New York Society for the Relief of Widows and Orphans of Medical Men. Instituted 1842.

ANNUAL STATEMENT FOR 1864.

November 26, 1864.

The Secretary presents the following Annual Statement of the condition of the Society:

All the funds of the Society, as shown by the last Annual Report, in September, 1864, were invested; they amounted to \$51,500, leaving a balance in the Treasury of \$58.

The receipts for the year ending September, 1864, were \$8,807 66, derived from the following sources:

Interest and premium on gold.....	\$4,722 46
Dues—life members and benefactors..	1,125 00
Donations.....	1,105 00
Surplus from anniversary dinner.....	55 00
Mortgage paid in.....	1,800 00
	<hr/>
	\$8,807 66

Disbursed in same period for	
Annuitants.....	\$662 20
Collecting.....	12 00
Sundry expenses—printing and advertising, &c.....	41 04
	<hr/>
	\$715 54

The members of the Society now number one hundred and ten, of whom eighty-three are for life, and twenty-seven annual subscribers. The benefactors (so constituted by the payment of one hundred and fifty dollars, or upwards, at one time,) number twenty-six, of whom four are laymen.

The Society extends its aid to the families of five of its deceased members.

Annual members pay an initiation fee of ten dollars, and ten dollars dues, in semi-annual payments; or one hundred dollars paid at one time constitutes a member for life.

At the annual meeting held November 30, 1864, the following gentlemen were elected officers for the ensuing year:

President, H. D. Bulkley, M.D.

Vice-Presidents, { William Detmold, M.D.
 { E. L. Beadle, M.D.

 { Alfred C. Post, M.D.

Treasurer, J. W. G. Clements, M.D.

Trustees, to serve three years, (twenty-one in all, seven being elected each year.) James R. Wood, M.D., John O. Stone, M.D., Edward DeLafield, M.D., James T. Gibert, M.D., Isaac E. Taylor, M.D., S. Conant Foster, M.D., John R. Vankleek, M.D.

Anatomy in the East.

In the last general report on public instruction in the Lower Provinces of the Bengal Presidency, Dr. NORMAN CHEVERS, principal of the Medical College, states that the number of

bodies dissected during the year amounted to 1,112, an extraordinary fact when it is considered that only a few years ago a native gentleman lost caste by touching a dead body. The total number of in and out-door patients who received relief at the hospital and in its dispensaries during the year amounted to 30,700, exclusive of the very large number treated in the Eye Infirmary. Dr. CHEVERS concludes his interesting report by stating that in March last his Highness the Maharajah of Jyepore, after having visited the college, was so pleased with it that he munificently presented the sum of one thousand rupees "to be devoted to any purpose the managers of the institution may determine."

The Yellow Fever in Newbern, N. C.

A writer from Newbern, speaking of the great conflagration that occurred in that city on the 19th of Nov., says: "The cause of so much property being destroyed was the complete disorganization of the once efficient fire department, the yellow fever having carried off nearly all the men, so that the engines were out of order, and the pumps nearly dry.

The yellow fever has swept away the largest portion of our population, and it is impossible to describe the scenes through which we have passed. During the rage of the pestilence all business but that of coffin-making was entirely suspended. On one single square there were thirty victims, among them Messrs. TAYLOR & JONES, Druggists; ROBERT DUNN, MOSES BAER, HERRITAGE, OXLEY & WILLIAMS. In another case, out of a mess of twenty-three, only three are now living. Twelve men were appointed to bury the dead, and of these all are dead but four. Among the deaths were WM. MOORE, Colonel AVERY and wife, JAMES BRYAN and wife, Mrs. LEDAN, Mrs. HOWARD, Mrs. ALLEN, Mrs. BROOKFIELD, Mrs. OSGOOD, HENRY JONES, and his father, and ALEXANDER CURTIS.

Out of the actual residents of Newbern one hundred and twenty-five are dead. The entire number of deaths by the fever was three thousand, of course, by far the largest number being Northerners. Many of the victims were buried late at night in rough coffins, and a number of the victims were found dead in their houses. The fever, as an epidemic, is now over, although some few cases occur of persons who doubtless had it in their systems. What, with fever and fire, the once beautiful town of Newbern is but the shadow of her former self.

New Hospital Transport.

The magnificent new hospital transport, *General J. K. Barnes*, so named in honor of the Surgeon-General, sailed recently for Hilton Head. It is spoken of as the best adapted ship for the purpose, ever fitted up in this country. The vessel was chartered for the medical department while she was yet on the stocks and before the usual state-rooms, saloons, and other ac-

commodations for passenger-vessels were commenced. She has been furnished, therefore, with a single aim for convenience in the special service for which she is designed. The work has been done under the immediate supervision of Colonel McDougall, Medical Director of the Department of the East, aided by Dr. Hoff, General VAN VLIET's Chief Quartermaster, and the owners. The ship is 1,400 tons burden, draws twelve feet of water, will make twelve miles an hour at sea, and can reach City Point, Va., or any other of the principal landings on the Southern coast. The accommodations for the officers and crew are entirely separated from those for the sick. They are upon the upper deck, and all the remaining space is used for hospital purposes. Accommodations for the Chief Surgeon and his Staff, for nurses, cooks, and other employees, are arranged also with special reference to economy, as well as the rooms for the dispensary, clothing, commissary stores, kitchen and dining-room for the patients, beside bath-rooms, ice-room, water-closets, with wards for 650 sick and wounded, containing well-filled bed-sacks, linen sheets, pillows, &c., &c., with every facility for lighting and ventilation. The entire vessel is heated by steam-pipes. The berths are arranged to slide up and down, so that the patients can be placed in them without difficulty or danger, and they are supported in their positions by iron pins. The *J. K. Barnes* is under the charge of Assistant Surgeon THOS. McMILLEN, U. S. A., who is an eminently kind, humane, and efficient officer, assisted by a full corps of medical officers, cadets, stewards, and nurses. The Surgeon-General receives a deserved compliment in the naming of this ship, and those engaged in her construction and splendid outfit, may point to her with confidence as a beautiful testimonial of the care of the Government for its suffering but uncomplaining heroes.

The Medical Department of the Army.

Mr. GEO. F. WILLIAMS, an intelligent correspondent of the *New York Daily Times*, in the Army of the Potomac writes as follows to that paper concerning the medical department of the Army:

"I have had recently an interesting conversation with one of the leading surgeons of this army, and I learned from him a confirmation of what I had already been informed concerning the *status* of the medical staff. Owing to a variety of causes, the medical officers find themselves depreciated and harassed beyond measure. This is the natural effect of the limited range of medical rank and emolument. The Surgeon for a regiment ranks as a major, his assistants as first lieutenants. A brigade surgeon, although elevated in his sphere of action, and a greater amount of responsibility resting upon his shoulders, still remains a major. The medical director for corps of an army, is a major, and strange as it may appear, very few and isolated cases have occurred where medical officers have risen to the rank of lieutenant-colonel.

It is owing to these causes that medical men of established reputation and distinguished skill are unwilling to encounter the dangers and hardships of military life. While their brother officers have the incentive of promotion and recognition of distinguished services, to fresh deeds of greater daring, the surgeons find themselves compelled to labor on in the full consciousness that their labors are unappreciated and frequently ignorantly condemned. I, myself, know of several instances of gentlemen who have relinquished brilliant civic reputations and large and remunerative practices, to come out in the army. These gentlemen, although ardently devoted to their blessed art, still feel bitterly the vast amount of unappreciated labor that they are called upon to perform, and while compelled to thus labor on, find themselves unable to gain any higher rank than that in which they first entered the service.

The casual reader may exclaim, that the proud conscientiousness that they are nobly doing good ought to be incentive enough for their longer stay; but I would like to know how many of our gallant colonels and brigadiers would be willing to remain out here at the seat of war if no higher rank were attainable. To come down to the simple affairs of emolument. People must live, and many of our surgeons have families to provide for. A major has \$155 per month, and out of this he has to support his position in a becoming manner, no small job now-a-days. Frequently a surgeon of a brigade or a division is held responsible for an immense amount of property of almost incalculable value. The gentlemen who has charge of a division is now responsible for \$15,000 worth of Government property, and despite the casualties and dangers of warfare he will have to render a strict account of the same. Some officers, owing to the carelessness of their subordinates, look forward to total bankruptcy and a loss of their little all, when they come to leave the service.

There is no doubt that the medical officer is placed in a false position owing to the total absence of graduation of rank. A speedy reform in this matter would tend to induce valuable surgeons who have treasured up vast stores of actual and practical knowledge of the healing art, to remain in the service.

Give them some tangible proof that their services are remembered and appreciated, let them have the means of showing to the world at large, that the medical profession is one of honor and of profit, and I am satisfied that much and lasting good would accrue from such a procedure. The members of the medical staff are in general, a painstaking class, but of late the numbers and talent of such officers have greatly deteriorated, owing to these causes, and it is now becoming a matter of serious consideration how now to fill up the depleted ranks of the corps of surgeons in our armies. Let us have a reform.

Army and Navy News.

ARMY.

CAPTURED.—Dr. STRAWBRIDGE, Medical Director of the 18th Army Corps, Army of the James, was captured in a demonstration made on the 7th of October, before Richmond. He was riding, accompanied by an orderly, at the extreme right, looking for a site for a hospital, and doubtless got too far from our troops without being conscious of it.

Dr. PORTER, Asst-Surgeon of the 118th New York, is also missing, and supposed to have been captured.

Concerning Dr. PORTER, Gen. BUTLER in a congratulatory order issued on the 11th of Oct., having reference to the affair of the 7th says:

"Asst-Surgeon J. G. Porter, 118th New York Vols, deserves the highest credit for his bravery and attention to duties, being the only surgeon in the brigade, advancing with his regiment in the charging column."

General Hospital at Troy.

A General Army Hospital has been organized at Troy, New York, Dr. HUBBARD being Surgeon in charge. It is a large establishment. Twelve wards are in course of construction—each to accommodate sixty patients.

The Preparation of Food in Special Diet Kitchens.

By order of the Secretary of War, permission is granted to Mrs. Anne Wettenmeyer, Special Agent U. S. Christian Commission, and such ladies as she may deem proper to employ by request of U. S. Surgeons, to visit the U. S. General Hospitals within the lines of the several military departments of the United States for the purpose of superintending the preparation of food in the Special Diet Kitchens. The necessary transportation will be furnished by the Quarter-Master's Department.

A New Hospital.

The Medical Department of the army is engaged in preparing the plans for an immense hospital, to be built upon the Severn river, near Annapolis, Maryland. This general hospital, which has been projected by Surgeon General Barnes, will eclipse in extent and accommodation any other institution of the kind in the world. It is intended to have it surrounded with extensive grounds for the exercise and amusement of the patients, it having been found by experience that ample opportunities for out-door exercise have a more beneficial effect, and contribute more to the speedy recovery of the patients than any other accessory of a hospital. The farm on which it is proposed to locate it comprises about one thousand acres, the owner of which is a secessionist, and within the rebel lines.

INSPECTION.—Dr Geo. H. Lyman, Medical Inspector, U. S. A., and Chief Medical Officer in the Department of the East, sailed for Hilton Head on the 16th ult., on a special tour of inspection of the Department of the South.

PROMOTIONS.—The following Promotions have been made in the Medical Staff of the U. S. Army:—Surgeons C. S. Trippler, Chas. McDougall, J. J. B. Wright, appointed Colonels by brevet, to date Nov. 29; Surgeon Madison Mills, U. S. A., has been appointed Medical Inspector-General, with rank of Colonel, to date Dec. 1; Surgeon Thos. A. McFarlin, U. S. A., Medical Director Army Potomac, appointed Lieutenant-Colonel by brevet.

NAVY.

The Bureau of Medicine and Surgery.

The following abstract of the report of Dr. WM. WHEELER, Chief of the Bureau of Medicine, to the Secretary of the Navy, we find in Mr. Welles report to the President.

The Chief of the Bureau of Medicine and Surgery states the number of casualties reported during the year to be 171 killed and 351 wounded. Total number of cases of sickness under treatment, 61,229; of which number 1,048 died, 58,070 were returned to duty or discharged, leaving 2,111 under treatment at the close of the year. The total number of deaths is 1,560. He suggests a reorganization of the Medical Department so as to place it in better harmony with the growth and expansion of other branches of the service, and to adapt it more efficiently to present wants. With the existing organization and pay, it is found impossible to procure the requisite number of medical officers, the superior inducements held out to enter the land service attracting many in that direction who would otherwise prefer service in the Navy. The statistics forming a part of the report show the large number of

resignations as well as the large proportion of those now in the volunteer service who decline positions in the permanent Corps. Since January, fifty-two resignations have occurred, and quite a number are now before the department unaccepted, simply because of the impossibility of filling the vacancies. It is suggested that the only remedy is to make the Medical Commission more desirable in pay and position. The subject is commended to the attention of Congress. Additional appropriations are required for the completion of hospitals, and an alteration of the law of March 3, 1851, relating to the value of rations of sick transferred to hospitals, is suggested. Authority to purchase the balance of Square No. 908, in the City of Washington, for a naval hospital, is also requested. The Government already owning a portion of the land makes it desirable on many accounts, that the remainder (some 14,000 feet,) should also be under control of the department.

Regular Naval Service.

ORDERED.—Surgeon J. W. Shively, to the *Vermont*.
Surgeon J. M. Brown, to temporary duty at the Navy Yard in New York.
Surgeon J. S. Dungan, to the Naval Asylum, Philadelphia, for duty.

DETACHED.—Passed Ass't Surgeon J. H. Macomber from the *Galena*, and to the *St. Louis*.
Surgeon A. L. Gibson, from the *St. Louis* on the reporting of his relief, and ordered North.

Volunteer Naval Service.

DETACHED.—Act'g Ass't Surgeon A. R. Rice, from the *Cass*, ordered to the *Tallapoosa*.
Act'g Ass't Surgeon D. T. Whyborn, from the *Adela*, and ordered to the *Albatross*.
Act'g Ass't Surgeon John H. Blodgett, from the *Com. Read*, and ordered to the *Morse*.

APPOINTED.—Joseph G. Ayres, Act'g Ass't Surgeon, and ordered to the *Ohio*.

OBITUARY.

DR. THOMPSON.

Dr. R. H. THOMPSON, formerly Health Officer at the port of New York, died recently at his residence in Brooklyn, after a short illness. His age was 47 years. He was a native of Rensselaer County, New York; practised medicine in Albany for ten years, and removed to Staten Island in 1855, having received the appointment of Health Officer. He held that position for four years, and it was in the last year of his term that the Quarantine riots occurred, in which he was a sufferer—his house having been burned by the rioters, with all its contents, and his family narrowly escaping with their lives. In 1858, Dr. Thompson removed to Brooklyn, and interested himself in various measures of public improvement; becoming President of the Brooklyn Central and Jamaica Railroad and Park Commissioner, and finally was appointed Quarantine Commissioner in 1863, to protect and represent the interests of the City of Brooklyn. To his skill as a physician and his executive talent, the port of New York is largely indebted for its present immunity from the epidemics incident to emigration and foreign commerce. His codification of the health laws, adopted by the legislature of New York, is now in force.

MARRIED.

HART-COOMBS.—On the 19th of October, in Vassalboro', Maine, by the Rev. T. Atwood, Dr. A. J. Hart, and Miss Sarah Ellen Coombs, both of China, Maine.

SHACKELTON-ROSE.—On Wednesday, October 26th, by the Rev. J. M. Rogers, J. C. Shackleton, M. D., of Middleton Point, N. J., and Cordelia, youngest daughter of Joseph Rose Esq., of Keyport, N. J.

KETCHAM-SCIDMORE.—On the 19th of October, in Unionville, N. J., by the Rev. Mr. Wadsworth, Dr. Horace C. Ketcham, late Medical Director of the Sac and Fox Agency, Kansas, and Miss Phebe Scidmore, of the former place.

MCKINLEY-LEVERING.—On the 15th of October, in Hope, Indiana, by the Rev. Edward Senseman, Dr. Samuel E. McKinley, of Louisiana, late of the Medical Staff, Department of the Gulf, U. S. A., and Miss Mattie R., daughter of the Hon. Charles J. Levering, formerly of North Carolina.

VAN RENSSELAER-TAYLOR.—On Thursday, October 20th, at St. John's Church, Govanstown, Md., by the Rev. W. T. Johnston, J. J. Van Rensselaer, Surgeon 98th N. Y. Vols., and Florence, daughter of C. R. Taylor, Esq., of Baltimore County.

ALDEN-LINCOLN.—On the 25th of October, in Philadelphia, by the Rev. Dr. Howe, Ass't Surgeon C. H. Alden, U. S. A., and Kate K., daughter of E. Lincoln, Esq., of Philadelphia.

DANNE-WILSON.—On Tuesday Nov. 1st, at Southport Ct., by the Rev. Mr. Amory, Frederick Danne, M. D., of New York, and Marian, daughter of Capt. Henry Wilson, of Southport.

LAW-REAKIRT.—On the 3d Dec., in this City, by the Rev. Wm. P. Breed, Dr. James Laws, U. S. N., and Virginia, daughter of the late Joseph Reakirt, Esq.

MCKONKEY-BLYTHE.—On the 6th of October, by the Rev. T. V. Milligan, William J. McConkey, M. D., and Sarah J. Blythe, all of Mapleton, Stark County, Ohio.

MULLEN-ARMSTRONG.—On the 25th of October, by the Rev. W. D. Patton, Dr. Henry Mullen, Act'g Ass't Surgeon U. S. A., and Miss Letitia, daughter of Mr. Jackson Armstrong, all of New York.

RANDOLPH-BAYARD.—At Woodbury N. J., by the Rev. Wm. Herbert Norris. John F. Randolph, Surgeon U. S. A., and Virginia Dashiell Bayard, daughter of Samuel J. Bayard, Esq.

SPANGLER-GREEN.—On the 27th of October, in Washington City, by the Rev. Wm. Suddards, D. D. Capt. John W. Spangler, U. S. A., and Ellen R., daughter of Dr. J. Green.

MORGAN-HYDE.—On Thursday, December 15th, at Jersey City, by the Rev. J. M. Holmes, Dr. Edisha Morgan, of Cincinnati, and Mrs. Lucretia A. Hyde.

PRICE-HAGERT.—On the 7th of December, by the Rev. A. A. Reinke, Dr. Burroughs Price, and Miss Amanda C., youngest daughter of Jacob E. Hagert, all of Philadelphia.

RUSS-QUINN.—On Tuesday, November 16th, in Williamsport, Pa., by the Rev. Wm. Sterling, Eben J. Russ, M. D., and Carrie L., only daughter of Geo. W. Quinn, Esq.

DIED.

PRIMROSE.—On the morning of the 24th of October, in this city, Henry C. Primrose, M. D., in the 23d year of his age.

SNOW.—On the 9th of October, in New York, Dr. A. B. Snow, Surgeon 1st Corps N. Y. Engineers.

BELLANGER.—On the 6th of October, at Morehead City, N. C., of yellow fever, Dr. J. B. Bellanger, of New Jersey, Surgeon in charge of Mansfield Hospital, U. S. A., at that place.

BLAISDELL.—On Thursday October 20th, at Grand Bridge Mills, Va., of yellow fever, contracted at Newbern, Wesley Blaisdell, M. D., Act'g Ass't Surgeon U. S. A., of Coeymans, Albany County, N. Y., aged 49 years.

BROWN.—On the 17th of December, in New York City, Dr. Henry Weeks Brown, son of the late Stephen Brown, M. D., in the 37th year of his age.

BUTLER.—On the 1st of December, in West Philadelphia, of congestive fever, Anne C. Webb, youngest daughter of Dr. S. W. and Mrs. Anne H. Butler, aged 2 years and 5 months.

GORE.—On the 24th of November, suddenly, at High Bridge, Pa., Dr. William M. Gore, late of this city.

LYMAN.—On Tuesday, December 6th, in Boston, Maria Cornelia Ritchie, aged 43 years, wife of Dr. Geo. H. Lyman, and only daughter of Hon. James T. Austin.

MILNOR.—On the 12th ult., in this city, Ellen, daughter of the late Dr. W. Henry and Margaret Milnor, in the 13th year of her age.

PARSONS.—On Wednesday, December 7th, at Colchester, Conn., Sarah, wife of Ezekiel W. Parsons, M. D.

RANNEY.—On Wednesday, December 7th, of typhus fever, Dr. Moses H. Ranney, Superintendent of New York City Lunatic Asylum, Blackwell's Island.

Medical Society of New Jersey.

The 99th Annual Meeting of the Medical Society of New Jersey, will be held at Burlington, on the 4th Tuesday (24th) of January, at 7½ o'clock, P. M.

Delegates will please to send on their certificates in advance.

410-12

WM. PIERSON,
Recording Secretary.

ANSWERS TO CORRESPONDENTS.

Correspondents will please bear in mind that it is just now exceedingly difficult to get some kinds of work done, and much delay is sometimes caused thereby in filling orders. Everything is at maximum prices. Many books are out of print, and publishers are not issuing many new works or editions. Foreign books had better not be ordered.

Dr. W. L. A., New York.—Two copies Tanner on Poisons, mailed to you in December.

Dr. J. H., Pittsburgh, Ind.—Wilson on Skin and Hair, mailed to you in December.

Dr. J. W., Martin's Ferry, O.—Parrish's Pharmacy mailed to you in December.

Dr. G. W., Army of Potomac.—Neill and Smith's compend, sent by mail in December.

Dr. D. G., Jamestown, Pa.—Wilson's Anatomy, mailed in December.

Dr. R. H. P., Stoyestown, Pa.—Tanner on Poisons, mailed to you in December.

Dr. W. S. C. P., Uncasville, Ct.—Parrish's Pharmacy and Beasley's Druggist's Receipt Book, mailed to you in December.

Dr. S. W. V., Olivet, Pa.—Slade on Diphtheria, mailed to you in December.

Dr. G. S. G., Freeport, N. Y.—Tilt's Uterine Therapeutics, mailed to you in December.

Dr. J. H. G., Philo, O.—Bartlett on Fevers, mailed to you in December.

Dr. R. H. M., Bound Brook N. J.—Parrish's Pharmacy, mailed to you on the 25th of December.

Dr. A. A. W., Army of Potomac.—Hamilton on Fractures, mailed to you in December.

Dr. F. C. E., Bristol, Ind.—Barclay's Diagnosis, was sent by mail in December.

Dr. I. G., Smith's Mills, Pa.—Dunglison's Physiology and Barclay's Diagnosis, sent by express in December.

Dr. W. W. G., Urbana, Ill.—Condie's Diseases of Children, Bedford's Obstetrics, Durkee's Gonorrhoea and Syphilis, Wythe's Dose Book, Cleveland's Medical Dictionary, and Da Costa's Medical Diagnosis, were sent by express on the 28th of December.

Dr. J. W. B., Brighton, Canada West.—Sergeant's Minor Surgery and Gross' Military Surgery were sent you by mail in December.

Dr. A. E. B., Mount Holly, N. J.—Da Costa's Diagnosis, and Visiting List, sent you by express on the 29th ult.

Dr. G. W. S., Cleveland, Ohio.—Durkee on Syphilis, and Visiting List, were sent you by express on the 29th ult.

Dr. W. H. McC., Pa.—Durkee on Syphilis, and Dixon on the Eye, were sent you in December.

Dr. J. G. McL., So. Wheeling, West Va.—Beasley's Druggist's Receipt Book, mailed to you in December.

Dr. W. P. S., Decatur, O.—Habersham on Alimentary Canal, mailed to you in December.

Dr. D. A., Freeport, Pa.—Carpenter on the Microscope, mailed to you in December.

Dr. S. P., Jackson, Cal.—Your bill of books, except Bernard and Huett's Operative Surgery, (Price \$35.) Whitehead on Abortion and Sterility, (out of print,) and Headland on the Action of Medicines, (out of print,) were sent by mail in December.

Dr. D. B. C., Ohio.—Slade on Diphtheria, mailed you Nov. 22d, 1864.

Dr. C. W., Williamsburgh N. Y.—Von Trosch on Diseases of the Ear, mailed you Nov. 22d, 1864.

Dr. Daniel W. T., Tenn.—Woodward on Camp Diseases, mailed you Nov. 22d, 1864.

Drs. S. S., and R. S. W., Pa.—Tilt's Hand Book of Uterine Therapeutics mailed you Nov. 22d, 1864.

Dr. D. S. R., Pa.—Slade on Diphtheria, mailed you Nov. 23d, 1864.

Dr. S. E. P., Ohio.—Wilson on the Skin and Hair, mailed you Nov. 30th, 1864.

Dr. S. H. B., Ohio.—Gross' Manual of Military Surgery, mailed you Nov. 30th, 1864.

Dr. G. W. G., Pa.—Slade on Diphtheria, mailed you Nov. 30th, 1864.

Dr. J. Q. R., Pa.—Parker's Syphilis and Whitehead's Abortion and Sterility, mailed you December 5th, 1864.

Dr. E. D. R., Pa.—Fuller on Rheumatism, Gout, &c., and a Hypodermic Injecting apparatus, mailed you December 6th, 1864.

Dr. A. M., Washington, D. C.—Macleod's outlines of Surgical Diagnosis, mailed December 7th, 1864.

Dr. J. W. B., Ky.—Beasley's Book of Prescriptions and Dixon on Diseases of the Eye, mailed December 7th, 1864.

Dr. Thos. M. W., Tenn.—Wood's practice of Medicine, Condie on Children, Churchill on Females, Erickson's Surgery, and Gross' Military Surgery, expressed to you December 13th, 1864.

Dr. C. K., East Fairfield, O.—Thomas' Medical Pronouncing Dictionary, mailed you December 13th, 1864.

A. F. P., Maine.—Da Costa's Diagnosis, and Tilt's Uterine Therapeutics, mailed you Nov. 9th, 1864.

R. S. H., Pa.—Parker's modern treatment of Syphilis, mailed you Nov. 14th, 1864.

T. J. C., Ind.—Hammond's Military Medical, and Surgical Essay's mailed you Nov. 14, 1864.

T. C. Y., Pa.—H. Barnard on School Architecture, mailed you Nov. 15th, 1864.

S. K. F., Iowa.—Tanner on Poisons, mailed you Nov. 19th, 1864.

Dr. J. G. A., Pa.—We know of no work on Chronic Diseases. They are treated of in works on the Practice of Medicine. What, however, will come nearest meeting your want, is a work on Medical Diagnosis. The best on that subject is that by Dr. Da Costa, lately published.

Dr. G. W. R., Mich.—Skeletons of the larger birds are best denuded of their muscular and other tissues by maceration. A good way to prepare skeletons of the smaller varieties, as the humming bird, is to remove the larger muscles carefully, and then place the skeleton near an ant's nest. They will soon leave you a nicely denuded skeleton.

Dr. A. A. H., Nookhunn Hill, Cal.—Your bill of Books was sent by mail in December. Hodge's Principles and Practice is \$15, and too large to send by mail. You can procure it of Roman & Co., in San Francisco.

Dr. W. O. B., Louisville, Ohio.—Discussions before Philadelphia Co. Medical Society, sent by mail in December.

Dr. S. B. P., Fredericksburg, Ohio.—Todd on Acute Diseases, sent by mail on the 30th ult.

Dr. E. S. E., Jordan, N. Y.—Two copies Parker on Syphilis, sent you by mail in December.

Dr. J. W. B., Lexington, Ky.—West on Os Uteri, sent by mail in December.

Dr. C. W., Williamsburgh, N. Y.—Cazeau on Midwifery, sent by mail in December.

Dr. M. C., Parkersburg, West Va.—Meigs' Childbed Fever, sent by mail on the 30th ult.

Dr. W. F. P., Johnston, Ohio.—U. S. Pharmacopoeia, sent by mail on the 30th ult.

Who was it?

On the 23d ult., we received a letter inclosing a sum of money for an instrument. The letter was without signature, and the State was omitted in the date.

Hand Books and Visiting Lists.

All the Hand Books and Visiting Lists ordered to this date, have been sent.

METEOROLOGY.

	26,	27,	28,	29,	30,	31,	J. I.
Wind.....	N. E.	N. E.	E.	S. W.	N. W.	N. W.	N. W.
Weather ...	Cl'dy. Rain.	Cl'dy. Fog.	Cl'dy. Fog.	Cl'dy. Rain.	Clear. Driz'e	Cl'dy. Snow.	Clear. 8 in.
Depth Rain...	6-10	5-10	2-10			9-10	
Thermometer							
Minimum.....	28°	35°	37°	33°	27°	30°	14°
At 5 A. M.....	38	39	40	35	29	35	21
At 12 M.....	41	40	46	36	34	38	24
At 3 P. M.....	41	43	45	35	35	34	25
Mean.....	37.50	39.25	42.25	34.75	31.25	34.25	21
Barometer.							
At 12 M.....	29.9	29.9	29.6	29.6	29.9	29.8	30.1

Germanstown, Pa.

B. J. LEEDON.

WANTED.

Subscribers having any of the following numbers to spare, will confer a favor, and likewise be credited on their running subscriptions, with such as they may return us.

Vols. I, II, III & IV. All the numbers.

Vol. V. No. 1, Oct. 6, '60; No. 19, Feb. 9, '61.

" VI. Nos. 19, Aug. 3, 10, '61.

" VII. Nos. 1, 2, 6, Oct. 5, 12, Nov. 9, '61; Nos. 10 to 12, Dec. 7, '61, to March 8, '63.

" VIII. Nos. 17, 18, 19, 22, 23, July 26, Aug. 2, 9, 30, Sept. 6, '62.

" IX. Nos. 6, 7, 8, 13 & 14, 17 & 18, Nov. 8, 15, 22, '61, Dec. 27, '62, & Jan. 3, '63, Jan. 24 & 31, '63.

" XI. Nos. 1, 3, 4, 5, 7, 11, 21, Jan. 2, 16, 23, 30, Feb. 13, March 12, May 21, '64.